



**The Meeting Transcript of  
The Los Angeles County  
Board of Supervisors**



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1                   [TRANSCRIPT OF RESUMED OPEN SESSION TUESDAY,  
2                   SEPTEMBER 20, 2005 BEGINS ON PAGE 167.]

3  
4  
5                   [REPORT OF ACTION TAKEN IN CLOSED SESSION,  
6                   SEPTEMBER 20, 2005, BEGINS ON PAGE 168.]

7  
8  
9  
10          [ APPLAUSE ]

11  
12       **SUP. MOLINA, CHAIR:** WOULD YOU ALL PLEASE STAND FOR OUR  
13       RESPECTIVE... (OFF-MIKE). (SLOVAK NATIONAL ANTHEM) (STAR  
14       SPANGLED BANNER)

15  
16       **SUP. MOLINA, CHAIR:** WOULD YOU ALL PLEASE BE SEATED. ON BEHALF  
17       OF THE LOS ANGELES COUNTY BOARD OF SUPERVISORS, AND ON BEHALF  
18       OF OUR COUNTY'S 10 MILLION RESIDENTS, WE ARE DEEPLY HONORED TO  
19       WELCOME HIS EXCELLENCY IVAN GASPAROVIC, THE PRESIDENT OF THE  
20       SLOVAK REPUBLIC. THE PRESIDENT IS ACCOMPANIED BY THE  
21       AMBASSADOR OF THE SLOVAK REPUBLIC, HIS EXCELLENCY, RASSISLAV  
22       CATIER, AND THE CONSUL-GENERAL OF THE SLOVAK REPUBLIC, THE  
23       HONORABLE FRANTISEK HUDEK. THE SLOVAK REPUBLIC IS OFTEN  
24       REFERRED TO AS THE HEART OF EUROPE BECAUSE OF ITS LOCATION AND  
25       ALSO BECAUSE OF THE HOSPITALITY AND FRIENDSHIP OF ITS WARM AND



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1 GENEROUS PEOPLE. THE SLOVAK REPUBLIC HAS A STRONG TRADITION OF  
2 DEMOCRACY AND HAS PEACEFULLY WEATHERED MANY DIFFICULT  
3 TRANSITIONS. SINCE YOUR NATION'S INDEPENDENCE IN 1993 AND,  
4 THROUGH YOUR STEADFAST EFFORT AND THE EFFORTS OF MANY  
5 PATRIOTS, THE SLOVAK REPUBLIC HAS MADE GREAT STRIDES IN A VERY  
6 SHORT TIME. IN 12 YEARS, THE SLOVAK REPUBLIC HAS BECOME A FULL  
7 MEMBER OF N.A.T.O. AND THE EUROPEAN UNION. APPROXIMATELY  
8 821,000 SLOVAK AMERICANS RESIDE IN CALIFORNIA, AND THEY ARE  
9 TRULY VALUED AND ADD TO THE RICH DIVERSITY OF OUR REGION.  
10 WE'RE VERY PLEASED THAT YOUR COUNTRY HAS OPENED UP A CONSULATE  
11 HERE IN LOS ANGELES, WHICH IS A TESTAMENT TO YOUR DESIRE TO  
12 CREATE BUSINESS AND TRADE OPPORTUNITIES BETWEEN THE LOS  
13 ANGELES REGION AND THE SLOVAK REPUBLIC. WE EXTEND TO YOU AND  
14 TO THE PEOPLE OF THE SLOVAK REPUBLIC OUR BEST WISHES FOR  
15 CONTINUED SUCCESS AND PROSPERITY AND NOW, MR. PRESIDENT, I  
16 INVITE YOU TO SHARE A FEW WORDS WITH US. [ APPLAUSE ]

17

18 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

19

20 **(VOICE OF INTERPRETER):** MADAM CHAIRMAN, DISTINGUISHED MEMBERS,  
21 FIRST OF ALL, I WANT TO THANK YOU VERY MUCH FOR INVITING ME  
22 AND MEETING WITH ME.

23

24 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

25





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1   **(VOICE OF INTERPRETER):** I'M THE PRESIDENT OF A COUNTRY WHICH  
2   HAS-- WHICH IS ONE OF THE MOST PROSPEROUS IN OUR REGION. THE  
3   WIDER AREA OF LOS ANGELES HAS MORE PEOPLE THAN THE ENTIRE  
4   REPUBLIC OF SLOVAKIA. YOU LIVE IN A COUNTY WHICH HAS ALWAYS  
5   ENJOYED A GREAT ATTENTION AND RESPECT BY ALL THE U.S.  
6   PRESIDENTS. THAT'S WHY IT'S A TRUE DELIGHT FOR ME TO BE HERE  
7   TO MEET WITH YOU AND I'M VERY MUCH LOOKING FORWARD TO BE  
8   MEETING WITH MEMBERS OF THE BUSINESS COMMUNITY HERE. I WANT TO  
9   OFFER SLOVAKIA'S COOPERATION IN ALL THE AREAS THAT WE  
10   MENTIONED. I'M VERY GRATEFUL TO THE MANNER YOU PRESENTED  
11   SLOVAKIA, MRS. CHAIRWOMAN. I TAKE DUE PRIDE IN THE SLOVAK  
12   PEOPLE AND ITS ACHIEVEMENTS AND IN OUR HISTORY AS WELL.  
13   SLOVAKIA'S HISTORY IS VERY LONG. IT STRETCHES OVER MORE THAN  
14   1,500 YEARS. WE ARE ONE OF THE OLDEST PEOPLES IN EUROPE. AND,  
15   OVER THOSE MORE THAN 1,000 YEARS, SLOVAKIA NEVER HAD ITS OWN  
16   STATE. SLOVAKIA HAS ALWAYS BEEN A PART OF ANOTHER STATE OR A  
17   CONGLOMERATE OF STATES.

18

19   **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

20

21   **(VOICE OF INTERPRETER):** 13 YEARS AGO, THE CZECH REPUBLIC AND  
22   SLOVAKIA DIVORCED, GIVING BIRTH TO TWO INDEPENDENT STATES AND,  
23   DURING THOSE SHORT 13 YEARS, WE HAVE COME A LONG WAY.

24

25   **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].



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1

2 **(VOICE OF INTERPRETER):** DURING THOSE SHORT 13 YEARS, WE BECAME  
3 FULL-FLEDGED MEMBERS OF THE U.N., THE E.U., N.A.T.O., AND  
4 WE'RE ALSO MEMBERS OF VARIOUS OTHER INTERNATIONAL  
5 ORGANIZATIONS.

6

7 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

8

9 **(VOICE OF INTERPRETER):** WE ARE MEMBERS OF THOSE ORGANIZATIONS  
10 THAT DECIDE THE FATE OF THIS WORLD.

11

12 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

13

14 **(VOICE OF INTERPRETER):** AND MY TRIP TO THE UNITED STATES HAD  
15 ALSO A PURPOSE.

16

17 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

18

19 **(VOICE OF INTERPRETER):** I ATTENDED THE 60TH U.N. GENERAL  
20 ASSEMBLY IN NEW YORK LAST WEEK, PRESENTING SLOVAKIA AS A  
21 FUTURE MEMBER, NON-PERMANENT MEMBER ON THE U.N. SECURITY  
22 COUNCIL, WHICH IS ANOTHER MAJOR ACHIEVEMENT FOR MY COUNTRY.

23

24 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

25



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1   **(VOICE OF INTERPRETER) :** OVER THE PAST 13 YEARS, SLOVAKIA HAS  
2   SEEN A LOT OF FOREIGN INVESTORS COMING IN AND NOW SLOVAKIA HAS  
3   GAINED THE STRENGTH TO BECOME AN INVESTOR ITSELF.

4

5   **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

6

7   **(VOICE OF INTERPRETER) :** MRS. CHAIRWOMAN, I WANT TO THANK YOU  
8   FOR GIVING ME THE FLOOR TO PRESENT TO YOU THIS WAY SLOVAKIA BY  
9   ADDING A FEW REMARKS AND I THANK YOU VERY MUCH FOR LISTENING  
10  TO MY REMARKS AND I'M VERY MUCH LOOKING FORWARD TO FUTURE  
11  COOPERATION BETWEEN MY NATION AND L.A. ALSO, BECAUSE THIS  
12  COUNTY HAS A VERY VIBRANT SLOVAK EX PAT COMMUNITY, SO I'M VERY  
13  MUCH LOOKING FORWARD TO OUR COOPERATION. THANK YOU VERY MUCH  
14  FOR YOUR ATTENTION. [ APPLAUSE ]

15

16  **SUP. MOLINA, CHAIR:** THANK YOU FOR THOSE KIND WORDS. IT IS  
17  INDEED OUR PLEASURE TO WELCOME YOU AND, MORE IMPORTANTLY, TO  
18  WORK WITH YOU AND TO FIND THOSE WAYS TO BETTER TRADE AND  
19  OPPORTUNITIES FOR YOUR COUNTRY AND OURS. WE'D LIKE TO MAKE A  
20  PRESENTATION OF A SPECIAL TOKEN OF FRIENDSHIP TO YOU AND WE  
21  WELCOME YOU AGAIN. IT'S A PLEASURE. [ APPLAUSE ]

22

23  **(VOICE OF INTERPRETER) :** THANK YOU VERY MUCH.

24

25  **SUP. MOLINA, CHAIR:** THANK YOU. [ APPLAUSE ]





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1

2 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

3

4 **(VOICE OF INTERPRETER):** MRS. CHAIRWOMAN, ALLOW ME TO PRESENT  
5 THIS SMALL TOKEN OF MY APPRECIATION TO YOU. IT'S A REMEMBRANCE  
6 FOR YOU AND FOR THE ENTIRE BOARD.

7

8 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

9

10 **SUP. MOLINA, CHAIR:** VERY GOOD. THANK YOU.

11

12 **(VOICE OF INTERPRETER):** AND FOR ALL THE MEMBERS, I HAVE ALSO A  
13 SMALL GIFT. IT IS A SMALL PIN WHICH MARKS MY ELECTION TO THE  
14 POST OF PRESIDENT OF SLOVAKIA.

15

16 **SUP. MOLINA, CHAIR:** THANK YOU SO VERY MUCH. VERY GOOD. I THINK  
17 YOU'VE HAD AN OPPORTUNITY TO MEET EVERYONE. WE LOOK FORWARD.  
18 WE HOPE YOU WILL HAVE A FRUITFUL AND GREAT OPPORTUNITY TO MEET  
19 WITH OUR BUSINESS COMMUNITY AND CONTINUE THE KIND OF  
20 FRIENDSHIP AND TRADE AND HOPE THAT YOUR VISIT WILL BE  
21 PROSPEROUS AND VERY, VERY EFFECTIVE ON BEHALF OF ALL OF YOUR  
22 COMPATRIOTS.

23

24 **HIS EXCELLENCY IVAN GASPAROVIC:** [ NATIVE TONGUE ].

25



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1   **(VOICE OF INTERPRETER)** : THANK YOU VERY MUCH AND MAY YOU ALWAYS  
2   ENJOY THE RESPECT OF YOUR PEOPLE. THANK YOU ONCE AGAIN.

3

4   **SUP. MOLINA, CHAIR**: THANK YOU SO VERY MUCH. [ APPLAUSE ]

5

6   **SUP. ANTONOVICH**: IF THE AUDIENCE WOULD PLEASE RISE, WE'LL  
7   BEGIN WITH OUR PLEDGE OF ALLEGIANCE. HAD WITH US TODAY WE HAVE  
8   FROM THE AMERICAN LEGION, PAUL GONZALEZ, WHO IS SERGEANT-OF-  
9   ARMS AT POST 2967, VETERANS OF THE FOREIGN WAR IN WILMINGTON  
10   AND WE'LL BE LED IN PRAYER BY PASTOR GLEN GIBSON OF THE NEW  
11   ASSEMBLY LIFE ASSEMBLY OF GOD IN DUARTE. SERGEANT.

12

13   **PAUL GONZALEZ**: PLEASE FACE THE FLAG OF OUR COUNTRY AS WE  
14   DEDICATE OUR FLAG OF OUR COUNTRY. PROPER SALUTE, HAND OVER  
15   YOUR HEART. [ PLEDGE OF ALLEGIANCE ]

16

17   **PASTOR GLEN GIBSON**: LET US PRAY. GRACIOUS HEAVENLY FATHER, WE  
18   COME BEFORE YOU WITH THANKFUL HEARTS THIS MORNING FOR YOUR  
19   GOODNESS, FOR YOUR BLESSINGS UPON US. WE ASK TODAY THAT YOU  
20   WOULD PARTICULARLY EXTEND MERCY TO THOSE SUFFERING FROM  
21   HURRICANE KATRINA. WE'RE MINDFUL OF THE NEED THAT CONTINUES  
22   THERE. WE ASK YOUR SUPERINTENDENTS OVER THESE MEETINGS AND  
23   PROCEEDINGS THIS MORNING, THAT YOU WOULD GRANT WISDOM AND  
24   DIRECTION, THAT YOU WOULD GIVE MORAL FORTITUDE AND COURAGE TO  
25   PURSUE JUST OBJECTIVES BY JUST MEANS, THAT YOUR STRENGTH WOULD



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1 REST UPON EACH MEMBER HERE. WE ASK FOR YOUR CONTINUED  
2 BLESSINGS UPON OUR COUNTY AND OUR COMMUNITY TO GRANT  
3 PROSPERITY AND CONCERN FOR OUR PEOPLE AND ALL WHO ARE  
4 RESIDENTS AND PARTICIPANTS IN THIS LAND. WE ASK THESE THINGS  
5 IN YOUR NAME. AMEN.

6

7 **SUP. ANTONOVICH:** SUPERVISOR KNABE?

8

9 **SUP. KNABE:** THANK YOU, MR. CHAIR, MEMBERS OF THE BOARD, LADIES  
10 AND GENTLEMEN. IT GIVES ME GREAT PLEASURE TO ONCE AGAIN  
11 INTRODUCE MR. PAUL GONZALEZ. MR. GONZALEZ IS A RESIDENT OF  
12 WILMINGTON AND IS CURRENTLY THE SERGEANT-AT-ARMS, AS WAS  
13 MENTIONED, OF THE V.F.W. POST NUMBER 2967 IN WILMINGTON. HE'S  
14 A PAST DISTRICT COMMANDER, A PAST STATE DISTRICT COMMANDER FOR  
15 DISTRICT 4. HE SERVED THE UNITED STATES ARMY FROM 1967 TO  
16 1970. SOME OF THE COMMENDATIONS AND DECORATIONS THAT HE  
17 RECEIVED DURING HIS YEARS OF SERVICE INCLUDING THE MERITORIOUS  
18 UNIT COMMENDATION, THE ARMY GOOD CONDUCT MEDAL, THE NATIONAL  
19 SERVICE DEFENSE MEDAL, THE VIETNAM SERVICE MEDAL WITH TWO  
20 STARS AND THE REPUBLIC OF VIETNAM CAMPAIGN MEDAL. CURRENTLY,  
21 HE WORKS FOR THE UNITED STATES POSTAL SERVICE. HE IS MARRIED  
22 AND HAS FOUR CHILDREN. WE REALLY APPRECIATE HIM TAKING TIME  
23 OUT OF HIS BUSY SCHEDULE TO JOIN US HERE TODAY AND I WOULD  
24 JUST ADD THAT HE'S VERY ACTIVE IN THE WILMINGTON COMMUNITY AND  
25 PARTICULARLY AS IT RELATES TO ISSUES WITH VETERANS AS WELL,



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1 TOO, SO, PAUL, WE THANK YOU FOR TAKING THE TIME TO COME DOWN  
2 AND LEAD US IN THE PLEDGE OF ALLEGIANCE. [ APPLAUSE ]

3

4 **SUP. ANTONOVICH:** PASTOR GLEN GIBSON RECEIVED HIS DEGREES FROM  
5 SOUTHERN CALIFORNIA COLLEGE AND HIS THEOLOGICAL-- ATTEND  
6 FULLER THEOLOGICAL SEMINARY. HE SERVED AS SENIOR PASTOR OF NEW  
7 LIFE ASSEMBLY OF GOD SINCE 1993 AND AS PRESIDENT OF THE DUARTE  
8 CHRISTIAN CHURCH AND CLERGY ASSOCIATION FOR THE PAST SEVERAL  
9 YEARS. HE'S LED HIS CHURCH IN SERVING HIS COMMUNITY THROUGH  
10 PROJECTS WHICH HAVE PROVIDED BACKPACKS AND SCHOOL SUPPLIES TO  
11 NEEDY STUDENTS, ORGANIZED THE Y2K PREPAREDNESS SEMINAR,  
12 ORGANIZING THE COMMUNITY PRAYER WALK AND PARTICIPATED IN THE  
13 ORGANIZATION AND ORGANIZING OF THE MAYOR'S ANNUAL THANKSGIVING  
14 PRAYER BREAKFAST AND THE DUARTE HIGH SCHOOL BACCALAUREATE.  
15 HE'S ALSO CO-SPONSORED AND HELPED WITH MANY OTHER PROGRAMS IN  
16 THE DUARTE COMMUNITY. HE'S SERVED ON THE STEERING COMMITTEE  
17 FOR THE INTERNATIONAL FRIENDSHIP COMMITTEE AND AS A MEMBER OF  
18 THE INTERNATIONAL DELEGATION TO CHINA IN MARCH OF THIS YEAR,  
19 WHICH WAS CO-SPONSORED BY THE CITY OF DUARTE AND THE DUARTE  
20 UNIFIED SCHOOL DISTRICT. SO, PASTOR GIBSON, THANK YOU VERY  
21 MUCH FOR COMING DOWN AND LEADING US TODAY IN PRAYER. [  
22 APPLAUSE ]

23



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1 **SUP. MOLINA, CHAIR:** CONGRATULATIONS AND THANK YOU. AT THIS  
2 TIME, I'M GOING TO ASK OUR EXECUTIVE OFFICER TO PLEASE CALL  
3 THE AGENDA.

4

5 **CLERK VARONA-LUKENS:** THANK YOU, MADAM CHAIR, MEMBERS OF THE  
6 BOARD. WE'LL BEGIN ON PAGE 6. AGENDA FOR THE MEETING OF THE  
7 COMMUNITY DEVELOPMENT COMMISSION, ITEM 1-D AND 2-D.

8

9 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR BURKE, SECONDED BY  
10 SUPERVISOR YAROSLAVSKY. IF THERE'S NO OBJECTION, SO ORDERED.

11

12 **CLERK VARONA-LUKENS:** AGENDA FOR THE MEETING OF THE REGIONAL  
13 PARK AND OPEN SPACE DISTRICT, ITEM 1-P.

14

15 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR KNABE, SECONDED BY  
16 SUPERVISOR BURKE. IF THERE'S NO OBJECTION, SO ORDERED.

17

18 **CLERK VARONA-LUKENS:** BOARD OF SUPERVISORS, ITEMS 1 THROUGH 16,  
19 I HAVE THE FOLLOWING REQUEST. ON ITEM NUMBER 4, SUPERVISOR  
20 ANTONOVICH REQUESTS THE ITEM BE CONTINUED TO OCTOBER 11TH AND  
21 WE ALSO HAVE A REQUEST FROM A MEMBER OF THE PUBLIC TO SPEAK ON  
22 THAT ITEM, MADAM CHAIR.

23

24 **SUP. MOLINA, CHAIR:** THAT ITEM WILL BE CONTINUED.

25



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1 **CLERK VARONA-LUKENS:** OKAY. I-- AND THEN, ON ITEM 16, HOLD FOR  
2 MEMBERS OF THE PUBLIC. THE REST ARE BEFORE YOU.

3

4 **SUP. MOLINA, CHAIR:** ALL RIGHT. MOVED BY SUPERVISOR  
5 YAROSLAVSKY, SECONDED BY SUPERVISOR BURKE. IF THERE'S NO  
6 OBJECTION, SO ORDERED.

7

8 **CLERK VARONA-LUKENS:** ADMINISTRATIVE OFFICER, ITEMS 17 THROUGH  
9 23.

10

11 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR YAROSLAVSKY, SECONDED  
12 BY SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

13

14 **CLERK VARONA-LUKENS:** CHILDREN AND FAMILY SERVICES, ITEMS 24  
15 AND 25.

16

17 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR YAROSLAVSKY, SECONDED  
18 BY SUPERVISOR BURKE. IF THERE'S NO OBJECTION, SO ORDERED.

19

20 **CLERK VARONA-LUKENS:** COMMUNITY DEVELOPMENT COMMISSION, ITEM  
21 26.

22

23 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR BURKE, SECONDED BY  
24 SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

25





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1 **CLERK VARONA-LUKENS:** HEALTH SERVICES, ITEMS 27 THROUGH 33. ON  
2 ITEM NUMBER 27, THE TERM OF THE CONTRACT SHOULD BE EFFECTIVE  
3 OCTOBER 1, 2004 THROUGH SEPTEMBER 30TH, 2006. I'M SORRY.

4

5 **SUP. MOLINA, CHAIR:** WHICH ITEM IS THIS? THIS IS THE ONE ON 27?

6

7 **CLERK VARONA-LUKENS:** ITEM-- ON 27.

8

9 **SUP. KNABE:** ARE YOU SURE YOU DON'T MEAN 2005/2006?

10

11 **CLERK VARONA-LUKENS:** I'M SORRY. IT SHOULD BE 2006, THROUGH  
12 2006.

13

14 **SUP. MOLINA, CHAIR:** ALL RIGHT. WITH NOTING THAT CONTRACT  
15 CHANGE, ALL RIGHT.

16

17 **CLERK VARONA-LUKENS:** OKAY. AND THEN, ON ITEM NUMBER 29, HOLD  
18 FOR SUPERVISOR KNABE AND SUPERVISOR ANTONOVICH. THE REST ARE  
19 BEFORE YOU.

20

21 **SUP. MOLINA, CHAIR:** ALL RIGHT. MOVED BY SUPERVISOR KNABE,  
22 SECONDED BY SUPERVISOR YAROSLAVSKY. IF THERE'S NO OBJECTION,  
23 SO ORDERED.

24

25 **CLERK VARONA-LUKENS:** HUMAN RESOURCES, ITEM 34.



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1

2 **SUP. MOLINA, CHAIR:** THAT ITEM HAS BEEN HELD FOR A SPEAKER, SO  
3 WE WILL HOLD THAT ITEM.

4

5 **CLERK VARONA-LUKENS:** OKAY. I'M SORRY. I DIDN'T HAVE THAT,  
6 MADAM CHAIR. OKAY. PARKS AND RECREATION, ITEMS 35 THROUGH 37.

7

8 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR BURKE, SECONDED BY  
9 SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

10

11 **CLERK VARONA-LUKENS:** PUBLIC SOCIAL SERVICES, ITEM 38.

12

13 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR YAROSLAVSKY, SECONDED  
14 BY SUPERVISOR BURKE. IF THERE'S NO OBJECTION, SO ORDERED.

15

16 **CLERK VARONA-LUKENS:** PUBLIC WORKS, ITEMS 39 THROUGH 45.

17

18 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR KNABE, SECONDED BY  
19 SUPERVISOR ANTONOVICH. IF THERE'S NO OBJECTION, SO ORDERED.

20

21 **CLERK VARONA-LUKENS:** SHERIFF, ITEM 46, HOLD FOR A MEMBER OF  
22 THE PUBLIC. TREASURER AND TAX COLLECTOR, ITEM 47.

23

24 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR ANTONOVICH, SECONDED  
25 BY SUPERVISOR BURKE. IF THERE'S NO OBJECTION, SO ORDERED.



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1

2 **CLERK VARONA-LUKENS:** MISCELLANEOUS COMMUNICATIONS, ITEMS 48  
3 THROUGH 50. ON ITEM NUMBER 48, HOLD FOR SUPERVISOR ANTONOVICH.

4

5 **SUP. MOLINA, CHAIR:** THAT ITEM WILL BE HELD. ON THE REMAINDER,  
6 MOVED BY SUPERVISOR ANTONOVICH, SECONDED BY SUPERVISOR  
7 YAROSLAVSKY. IF THERE'S NO OBJECTION, SO ORDERED.

8

9 **CLERK VARONA-LUKENS:** ORDINANCE FOR INTRODUCTION AND I'LL READ  
10 THE SHORT TITLE INTO THE RECORD, AN ORDINANCE AMENDING TITLE  
11 6, SALARIES OF THE LOS ANGELES COUNTY CODE BY RESTORING  
12 INADVERTENTLY OMITTED PROVISIONS TO SECTION 6.78.350-L.R.N.S.  
13 AND ADDING INFORMATION CONCERNING THE COMPENSATION OF ONE  
14 UNCLASSIFIED POSITION TO SECTION S IN THE DEPARTMENT OF HEALTH  
15 SERVICES. AND WE HAVE A REQUEST FROM A MEMBER OF THE PUBLIC TO  
16 HOLD THIS ITEM 51. ORDINANCES FOR ADOPTION, ITEM 52 AND 53.  
17 FOR THE RECORD, ON ITEM 53, SUPERVISOR MOLINA VOTES "NO."

18

19 **SUP. MOLINA, CHAIR:** ALL RIGHT. ITEM 52 AND 53 ARE BEFORE US.  
20 NOTING THAT EXCEPTION, MOVED BY SUPERVISOR KNABE, SECONDED BY  
21 SUPERVISOR YAROSLAVSKY. IF THERE'S NO OBJECTION, SO ORDERED.

22

23 **CLERK VARONA-LUKENS:** SEPARATE MATTERS, ITEMS 54 THROUGH 57. ON  
24 ITEM 54, I'LL READ THE TITLE INTO THE RECORD. THE TREASURER  
25 AND TAX COLLECTOR'S RECOMMENDATION TO ADOPT RESOLUTION



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1 AUTHORIZING THE ISSUANCE AND SALE OF LOS ANGELES UNIFIED  
2 SCHOOL DISTRICT 2005/2006 TAX AND REVENUE ANTICIPATION NOTES  
3 IN AGGREGATE PRINCIPAL AMOUNT NOT TO EXCEED \$750 MILLION. THAT  
4 ITEM IS BEFORE YOU.

5

6 **SUP. MOLINA, CHAIR:** ALL RIGHT. MOVED BY SUPERVISOR BURKE,  
7 SECONDED BY SUPERVISOR ANTONOVICH. IF THERE'S NO OBJECTION, SO  
8 ORDERED.

9

10 **CLERK VARONA-LUKENS:** ON ITEM 55, HOLD FOR A REPORT. ON ITEM  
11 56, AS NOTED ON THE AGENDA, THE LIBRARIAN REQUESTS THE ITEM BE  
12 CONTINUED TO OCTOBER 11TH. AND, ON ITEM 57, HOLD FOR A REPORT.

13

14 **SUP. MOLINA, CHAIR:** VERY GOOD.

15

16 **CLERK VARONA-LUKENS:** BUDGET MATTERS, ITEMS 58 THROUGH 61.

17

18 **SUP. MOLINA, CHAIR:** ALL RIGHT. ARE WE GOING TO TAKE THESE UP  
19 SEPARATELY OR HOW ARE WE GOING TO DO THAT?

20

21 **CLERK VARONA-LUKENS:** I DON'T HAVE A NOTE ON THESE SO...

22

23 **SUP. MOLINA, CHAIR:** YES, WE'LL HOLD THOSE ITEMS.

24



**The Meeting Transcript of  
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1 **CLERK VARONA-LUKENS:** MISCELLANEOUS, ADDITIONS TO THE AGENDA  
2 REQUESTED BY BOARD MEMBERS AND THE CHIEF ADMINISTRATIVE  
3 OFFICER, WHICH WERE POSTED MORE THAN 72 HOURS IN ADVANCE OF  
4 THE MEETING, AS INDICATED ON THE GREEN SUPPLEMENTAL AGENDA. ON  
5 ITEM 62-A, HOLD FOR SUPERVISOR MOLINA. 62-B IS BEFORE YOU.

6

7 **SUP. MOLINA, CHAIR:** ALL RIGHT. MOVED BY SUPERVISOR ANTONOVICH,  
8 SECONDED BY SUPERVISOR YAROSLAVSKY. IF THERE'S NO OBJECTION,  
9 SO ORDERED.

10

11 **CLERK VARONA-LUKENS:** ON 62-C, HOLD FOR A MEMBER OF THE PUBLIC.

12

13 **SUP. MOLINA, CHAIR:** WE'LL HOLD THAT ITEM.

14

15 **CLERK VARONA-LUKENS:** 62-D.

16

17 **SUP. MOLINA, CHAIR:** MOVED BY MYSELF, SECONDED BY SUPERVISOR  
18 BURKE. IF THERE'S NO OBJECTION, SO ORDERED.

19

20 **CLERK VARONA-LUKENS:** 62-E.

21

22 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR BURKE, SECONDED BY  
23 SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

24

25 **CLERK VARONA-LUKENS:** 62-F.



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1

2 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR YAROSLAVSKY, SECONDED  
3 BY SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

4

5 **CLERK VARONA-LUKENS:** AND THAT COMPLETES THE AGENDA. BOARD OF  
6 SUPERVISORS' SPECIAL ITEMS BEGINS WITH SUPERVISORIAL DISTRICT  
7 NO. 4.

8

9 **SUP. MOLINA, CHAIR:** YOUR PRESENTATIONS THIS MORNING, MR.  
10 KNABE.

11

12 **SUP. KNABE:** YES, MADAM CHAIR. THIS MORNING, I MOVE THAT WE  
13 ADJOURN IN MEMORY OF GILL YOUNG, WHO PASSED AWAY AT THE VERY  
14 YOUNG AGE OF 55. HE WAS A LONG-TIME ACTIVE MEMBER OF THE LOS  
15 VERDES MEN'S CLUB. HE WAS PLAYING GOLF JUST A COUPLE WEEKS AGO  
16 AND-- WITH HIS SON AND FAMILY MEMBERS AND HAD A MASSIVE HEART  
17 ATTACK AND PASSED AWAY. SURVIVED BY HIS SONS, MATT AND CHRIS,  
18 BROTHERS, ROB AND DANNY, NIECES, ERIN AND JENNY AND SEVERAL  
19 AUNTS, UNCLES AND COUSINS. HE'LL BE MISSED BY ALL THAT KNEW  
20 HIM. GREAT GUY. ALSO THAT WE ADJOURN IN MEMORY OF JESS GRUNDY,  
21 WHO PASSED AWAY AT THE AGE OF 87. HE WAS A LONG BEACH  
22 INVESTMENT BROKER. HE DID MANY, MANY SEMINARS AND HE WAS VERY  
23 ACTIVE IN THE LONG BEACH COMMUNITY. HE HELPED ESTABLISH THE  
24 COMMUNITY HOSPITAL LONG BEACH FOUNDATION, HE ACTIVELY  
25 SUPPORTED THE LONG BEACH CITY COLLEGE AND WAS RECENTLY





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1     INDUCTED INTO ITS HALL OF FAME. HE SERVED ON THE SALVATION  
2     ARMY BOARD AND AS A DIRECTOR THE CHAMBER OF COMMERCE AND HE  
3     WAS ALSO VERY ACTIVE AT THE LONG BEACH ALPS. HE'S SURVIVED BY  
4     HIS WIFE, DONNA, DAUGHTERS, SUZANNE AND MELINDA, STEPDAUGHTER  
5     PAIGE AND WESLEY AND GRANDCHILDREN, KIMBERLY, DARRELL, SCOTT,  
6     ANDREW, AND SIX GREAT- GRANDCHILDREN. HE WAS PRECEDED IN DEATH  
7     BY HIS WIFE OF 50 YEARS, EVELYN. GREAT MEMBER OF THE LONG  
8     BEACH COMMUNITY. WILL BE SADLY MISSED. ALSO WE ADJOURN IN  
9     MEMORY OF DOLLY SAGER, WHO PASSED AWAY ON SEPTEMBER 13TH AT  
10    THE AGE OF 89. SHE HAS BEEN A VERY ACTIVE MEMBER OF THE  
11    PATHWAYS HOSPICE, A CAREGIVER CLIENT FOR THE PAST 5 YEARS. SHE  
12    WAS A CELEBRITY, OFTEN SEEN IN THE NEWSLETTER AND VARIOUS  
13    SLIDE SHOW PRESENTATIONS SURROUNDED BY THE PATHWAY CHRISTMAS  
14    CAROLERS AND SHE ATTENDED MANY OF THE VOLUNTEER APPRECIATION  
15    EVENTS. SHE'S SURVIVED BY HER TWO DAUGHTERS, RITA AND HEDDY.  
16    ALSO AND I'M SURE ALL MEMBERS AND OTHERS, THAT WE ADJOURN IN  
17    THE MEMORY OF MR. SIMON WIESENTHAL, WHO PASSED AWAY, SO ALL  
18    MEMBERS. OBVIOUSLY, HE HAD AN INCREDIBLE RECORD AND HE HELPED  
19    BRING OVER A THOUSAND WAR CRIMINALS TO JUSTICE. HE DIED TODAY  
20    IN VIENNA AT THE AGE OF 96. THOSE ARE MY ADJOURNMENTS. CALL  
21    UP-- ITEM 62-A? YOU HELD 62-A?

22

23    **SUP. MOLINA, CHAIR:** YES. WELL, I'M JUST ASKING THAT THAT BE--  
24    I DIDN'T HOLD IT. I SAID I WOULD LIKE TO REFER IT TO CLOSED  
25    SESSION.



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1

2 **SUP. KNABE:** OKAY. ALL RIGHT. I THOUGHT YOU SAID YOU HELD.  
3 OKAY. SO THAT WOULD BE 62-A WOULD BE REFERRED TO CLOSED  
4 SESSION.

5

6 **SUP. MOLINA, CHAIR:** ALL RIGHT. SO REFER IT TO CLOSED SESSION.

7

8 **SUP. KNABE:** OKAY. ITEM 29.

9

10 **SUP. MOLINA, CHAIR:** ITEM 27.

11

12 **SUP. KNABE:** 29.

13

14 **SUP. MOLINA, CHAIR:** ITEM 29?

15

16 **SUP. KNABE:** YEAH. I THINK MIKE HELD IT AS WELL, TOO.

17

18 **SUP. MOLINA, CHAIR:** ALL RIGHT. SO WE NEED THE DEPARTMENT OF  
19 HEALTH SERVICES. I'M SORRY? THEY'RE NOT HERE YET, SO CAN WE  
20 HOLD THAT ON THE TABLE?

21

22 **SUP. KNABE:** ALL RIGHT. AND THEN THE OTHER ITEM WOULD BE THE  
23 H.A.B. ITEM BUT THEY'RE NOT HERE YET FOR THAT, EITHER, SO I'M  
24 FINISHED.

25



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1    **SUP. MOLINA, CHAIR:** WHAT NUMBER ARE YOU DOING NOW?

2

3    **SUP. KNABE:** NO, I'M FINISHED. I JUST CALLED UP THE ITEMS  
4    THAT...

5

6    **SUP. MOLINA, CHAIR:** ALL RIGHT. SUPERVISOR ANTONOVICH.

7

8    **SUP. ANTONOVICH:** LET ME FIRST MOVE THAT WE ALSO JOIN IN THAT  
9    SIMON WIESENTHAL'S ADJOURNMENT. HE HAS BEEN A CREDIT TO  
10    BRINGING PEOPLE TO JUSTICE. WE APPRECIATED HIS LEADERSHIP AND  
11    BEING A ROLE MODEL. FOR MANY OF OUR YOUNG PEOPLE TO UNDERSTAND  
12    THAT YOU CAN STILL BE A EFFECTIVE FIGHTER FOR JUSTICE,  
13    REGARDLESS OF YOUR AGE AND, AT 96, HE WAS AN INCREDIBLE ROLE  
14    MODEL. ALSO, RICHARD CARROLL, WHO PASSED AWAY AT THE AGE OF  
15    90. HE WAS VICE PRESIDENT OF B.F. GOODRICH COMPANY, WHICH  
16    LATER TODAY IS YOKOHAMA TIRE COMPANY. HIS FAMILY THEN MOVED TO  
17    SHANGHAI AND HE RETURNED TO LOS ANGELES BECAUSE THE GOODRICH  
18    PLANT HAD BEEN TOTALLY DESTROYED BY AN EARTHQUAKE.  
19    REPRESENTING THE CALIFORNIA REPUBLICAN PARTY AT TWO NATIONAL  
20    CONVENTIONS, HE WAS AN ACTIVE CAMPAIGNER FOR HIS SON-IN-LAW,  
21    CONGRESSMAN ROBERT BADHAM, A MEMBER WHO I SERVED WITH IN THE  
22    STATE LEGISLATURE. HE SERVED 7 TERMS AS A MEMBER OF THE STATE  
23    ASSEMBLY AND 6 TERMS AS A MEMBER OF THE HOUSE OF  
24    REPRESENTATIVES. MR. CARROLL IS SURVIVED BY HIS BROTHER, PAUL,  
25    HIS SON, DAVID AND DAUGHTERS, ANN AND CANDICE, ANN BADHAM AND



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1 CANDICE SNIDER. CHUCK OBREMSKI, WHO WAS THE CHAPLAIN FOR THE  
2 LOS ANGELES ANGELS BASEBALL TEAM AND MIGHTY DUCKS HOCKEY  
3 FRANCHISE. HE PASSED AWAY ON SUNDAY AFTER BATTLING A RARE FORM  
4 OF CANCER FOR THE PAST TWO YEARS. HE FOUNDED THE KINDRED  
5 COMMUNITY CHURCH IN ANAHEIM HILLS, THE SAME YEAR HE WAS  
6 DIAGNOSED WITH SOFT TISSUE SARCOMA. AT SUNDAY'S HOME GAMES, HE  
7 REGULARLY HELD 20-MINUTE PRAYER SERVICES FOR THE LOS ANGELES  
8 ANGELS AND THE VISITING TEAM TOGETHER. THE ANGEL BALL PLAYERS  
9 CONSIDERED HIS PRE-GAME SERMON SO CENTRAL THAT, AFTER WINNING  
10 THE WORLD SERIES, THE TEAM PRESENTED HIM WITH THE PLAYER'S  
11 RING ON EASTER SUNDAY 2003. HE COULD ENCOURAGE YOU TO KEEP  
12 FIGHTING DAY TO DAY. HE'S SURVIVED BY HIS WIFE, LINDA, HIS  
13 THREE CHILDREN AND TWO GRANDCHILDREN. MARK AGUIRRE, WHO IS  
14 RETIRED CAPTAIN FROM THE LOS ANGELES COUNTY SHERIFF'S  
15 DEPARTMENT. HIS LAST ASSIGNMENT WAS AT THE RECORD AND  
16 IDENTIFICATIONS BUREAU IN AUGUST 19TH, 2005. RICHARD BARRON,  
17 RETIRED DEPUTY, LOS ANGELES COUNTY DEPUTY SHERIFF, PASSED AWAY  
18 ON SEPTEMBER 8TH. HE RETIRED IN JUNE OF 1982. ROBERT SARINANA,  
19 WHO IS A RETIRED DEPUTY SHERIFF. HIS LAST ASSIGNMENT WAS MARCH  
20 31ST, 2001. RICHARD JOHN SMITH, LITTLE ROCK RESIDENT, PASSED  
21 AWAY AFTER A LONG ILLNESS, WAS A AIR FORCE VETERAN ASSIGNED TO  
22 THE STRATEGIC AIR COMMAND FROM 1958 TO 1962. AFTER LEAVING THE  
23 AIR FORCE, HE BECAME A MEMBER OF THE LOS ANGELES POLICE  
24 DEPARTMENT AND HE SERVED FROM THE LOS ANGELES POLICE  
25 DEPARTMENT IN THE FOOTHILLS, CENTRAL AND NEWTON AND WILSHIRE



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1 STATIONS FROM 1972 TO 2002. THEN HE WENT TO WORK FOR LOCKHEED.  
2 HE IS SURVIVED BY HIS WIFE, ALICE, HIS MOTHER-IN-LAW, JUANITA  
3 ALCOTT, WHO IS A REAL FINE ROLE MODEL IN THE ANTELOPE VALLEY,  
4 HIS SON, SHAWN, HIS DAUGHTER, RACHEL AND STEPDAUGHTERS, LAURA,  
5 VICKI AND BONNIE. DIANE POPOVICH, WHO PASSED AWAY AT HER HOME.  
6 AND MARTA BOHN-MEYER, WHO WAS A CHIEF ENGINEER FOR THE  
7 NATIONAL AERONAUTICS AND SPACE ADMINISTRATION, DRYDEN FLIGHT  
8 RESEARCH CENTER AT OUR EDWARDS AIR FORCE BASE. SHE WAS ONLY 48  
9 YEARS OLD. SHE WAS A SPECIAL INDIVIDUAL, BUT SHE DIED IN A  
10 PRIVATE AIRPLANE CRASH, HER PRIVATE AIRPLANE BACK EAST. SHE  
11 WAS ONLY 48 YEARS OLD. AND RICHARD JOSEPH BOUCHARD WHO PASSED  
12 AWAY AT HUNTINGTON MEMORIAL HOSPITAL WITH CANCER, FROM LA  
13 CANADA. HE WAS A DIRECTOR OF DIMJIM, MEMBER OF THE LOS ANGELES  
14 COUNTY ECONOMIC DEVELOPMENT COMMISSION CORPORATION AND QUITE  
15 INVOLVED IN THE COMMUNITY AND ONE OF THE OUTSTANDING ENGINEERS  
16 IN OUR NATION. AND THOSE ARE MY ADJOURNMENTS. AND WE HAVE  
17 LITTLE RAVEN, WHO IS HERE. MARSHA MAYEDA, OUR DIRECTOR OF  
18 ANIMAL CONTROL. RAVEN IS 12 WEEKS OLD. AND THOSE WHO ARE  
19 WATCHING AT HOME CAN CALL (562) 728-4644. AND THIS IS LITTLE  
20 RAVEN IN TIME TO CELEBRATE THE HOLIDAYS WITH YOU. SO THIS IS  
21 RAVEN. ANYBODY WHO'D LIKE TO ADOPT RAVEN, YOU CAN CALL THE  
22 NUMBER AT THE BOTTOM OF YOUR TELEVISION SCREEN OR ANYBODY IN  
23 THE AUDIENCE. A LITTLE FEISTY LITTLE CRITTER. I CAN HEAR HIS  
24 HEART GOING. [ INDISTINCT CONVERSATION ]

25



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1    **SUP. ANTONOVICH:** ITEM 51.

2

3    **SUP. MOLINA, CHAIR:** ITEM 51 AND 34 WERE HELD BY DR. GENEVIEVE  
4    CLAVREUL. DR. CLAVREUL, IF YOU'D JOIN US ON ITEM NUMBER 34 AND  
5    51, PLEASE.

6

7    **DR. GENEVIEVE CLAVREUL:** GOOD MORNING, BOARD OF SUPERVISORS.  
8    THIS IS DR. GENEVIEVE CLAVREUL. I AM VERY CONCERNED WHEN I  
9    SEE, YOU KNOW, ITEM 54 AND 61. I MEAN, I KNOW THAT KING DREW  
10   IS A TOUGH POSITION TO FILL, BUT NOW THE SIZE OF KING DREW IS  
11   A LITTLE UNDER 200-BED HOSPITAL AND TO APPROVE AN ANNUAL  
12   SALARY FOR MISS ANTONIETTE SMITH HEBBS OF \$225,000 IS  
13   DEFINITELY WAY ABOVE MARKET. BUT, BEYOND THAT, I THINK THE  
14   ORDINANCE WILL GO WITH IT, ALLOWING HER-- ASKING MORE THAN THE  
15   GOLDEN PARISH, WE'RE CALLING IT PLATINUM PARISH HOOD.  
16   ACCORDING TO WHAT I'VE BEEN ABLE TO ASSESS IS THAT, EVEN AFTER  
17   WORKING JUST ONE DAY, IF SHE'S DISMISSED BY DR. GARTHWAITE,  
18   SHE WILL GET PAID FOR TWO-YEAR SALARY. YOU KNOW, BUT I KNOW  
19   IT'S ESPECIALLY IN LOS ANGELES, YOU COME FOR ONE YEAR, YOU GET  
20   PAID FOR TWO. NOT ACCORDING TO WHAT THE COUNSEL FORTNER  
21   IDENTIFIED. HE SAID, AFTER THE FIRST DAY OF HER EMPLOYMENT,  
22   NOT JUST AFTER A YEAR, SHE WILL RECEIVE ONE-YEAR SEVERANCE.  
23   AND I THINK THAT'S APPALLING. IT IS APPALLING THAT WE PUT THAT  
24   TYPE OF ORDINANCE OUT. THERE IS NO SPECIFICATION OF POOR  
25   PERFORMANCE, OF NOTHING LIKE THAT BUT THAT'S ONE THING THIS





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1 COUNTY IS USED TO. YOU KNOW, WE HAVE PAID CAMDEN ALMOST A  
2 MILLION DOLLARS, WE ARE PAYING LIMBAUGH A TREMENDOUS AMOUNT,  
3 WE ARE PAYING NAVIGANT 18 MILLION AND NOW WE ARE GOING TO PAY  
4 SOMEBODY \$225,000, EVEN IF IT'S JUST FOR ONE DAY. THERE'S  
5 SOMETHING WRONG IN THAT PICTURE. YOU MAY NOT CARE BUT THE  
6 PUBLIC DO CARE AND I THINK EVENTUALLY YOU WILL BE MADE TO  
7 ACCOUNT FOR THIS WASTE OF MONEY. THANK YOU.

8

9 **SUP. MOLINA, CHAIR:** THANK YOU SO MUCH, DR. CLAVREUL. THOSE  
10 ITEMS ARE BEFORE US, ITEM 34 AND 51. MOVED BY SUPERVISOR  
11 ANTONOVICH, SECONDED BY SUPERVISOR KNABE. IF THERE'S NO  
12 OBJECTION, SO ORDERED.

13

14 **SUP. ANTONOVICH:** ITEM 16.

15

16 **SUP. MOLINA, CHAIR:** ITEM NUMBER 16. WE HAVE TWO PEOPLE THAT  
17 WISH TO ADDRESS US. BRUCE PERELMAN AND MALURY SILBERMAN. I  
18 APOLOGIZE. PLEASE JOIN US. PLEASE PROCEED.

19

20 **SPEAKER:** THANK YOU. LAST WEEK, LAST WEEK, WE ASKED FOR  
21 IMMUNITY FOR PERSONS WHO CAME FORWARD WITH INFORMATION RELATED  
22 TO THE USE OF COUNTY EMPLOYEES ON COUNTY TIME TO FURTHER  
23 S.E.I.U.'S L.A.C.E.R.A. BOARD CAMPAIGNS. WHILE YOU DID NOT  
24 GRANT IMMUNITY, YOU INDICATED YOU WOULD KEEP THE INFORMATION  
25 CONFIDENTIAL. THE KEY WITNESS WAS NOT SATISFIED WITH THE



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1 CONFIDENTIALITY THAT WAS OFFERED AND REITERATED THAT, WITHOUT  
2 A GUARANTEE THAT HE WAS IMMUNE FROM GETTING INTO TROUBLE, HE  
3 WAS UNWILLING TO PROVIDE ALL THE INFORMATION HE HAD. IT IS  
4 EXTREMELY FRUSTRATING TO HAVE HAD PEOPLE TELL US OF  
5 WRONGDOING, YET NOT BEING WILLING TO COME FORWARD AND TESTIFY.  
6 EVEN THOSE WHO WOULD, WOULD ONLY DO SO WITH IMMUNITY, WHICH  
7 WASN'T AVAILABLE. THIS BEING SAID, WE UNDERSTAND YOU MUST  
8 CERTIFY THE ELECTION BECAUSE YOU MUST BASE YOUR DECISION ON  
9 THE INFORMATION THAT YOU DO HAVE AND WE ACCEPT THAT. WE  
10 REALIZE THAT, BY CONTINUING THIS MATTER FOR A WEEK AND  
11 OFFERING CONFIDENTIALITY, IF NOT IMMUNITY, YOU MADE AN EXTRA  
12 EFFORT TO TRY AND GET AT THE TRUTH AND THAT MEANS A LOT AND,  
13 FOR DOING SO, WE ARE SINCERELY GRATEFUL. WE THOUGHT ABOUT WHAT  
14 WE COULD SAY TODAY THAT MIGHT BE POSITIVE IN TERMS OF HELPING  
15 TO CLEAN UP THE L.A.C.E.R.A. ELECTIONS IN THE FUTURE. WE THINK  
16 THE MOST IMPORTANT ISSUE IS THIS: WHILE THE COUNTY IS  
17 RESPONSIBLE FOR ADMINISTERING THE ELECTION, NO ONE AT THE  
18 COUNTY ACCEPTS RESPONSIBILITY FOR PROACTIVELY SEEING THE RULES  
19 ARE FOLLOWED DURING THE ELECTION. SOME SAY THE RESPONSIBLE  
20 PARTY IS THE EXECUTIVE OFFICER. OTHERS, THE REGISTRAR-  
21 RECORDER. OTHERS SAY THE VARIOUS DEPARTMENT MANAGERS SHOULD  
22 SEE THAT THEIR STAFF IS NOT FURTHERING POLITICAL CAMPAIGNS ON  
23 COUNTY TIME. AND, FRANKLY, SOME SAY NO ONE IS RESPONSIBLE  
24 SINCE NO ONE IS EXPLICITLY ASSIGNED THE RESPONSIBILITY IN THE  
25 RESOLUTION. SO, IN CONCLUSION, WE RESPECTFULLY RECOMMEND THAT,



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1 AS A FIRST STEP IN IMPROVING THE ELECTION PROCESS, YOUR BOARD  
2 DIRECT THAT, IN THE NEXT VERSION OF THE ELECTION RESOLUTION,  
3 WHICH IS ONLY MONTHS AWAY, THAT SOMEONE SPECIFIC IS DESIGNATED  
4 AS BEING RESPONSIBLE FOR ADMINISTERING THE ELECTION AND THAT  
5 IT IS EXPLICITLY STATED THAT THAT INCLUDES SEEING THAT COUNTY  
6 EMPLOYEES, BEYOND JUST THE CANDIDATES, AREN'T PERFORMING  
7 CAMPAIGN ACTIVITIES ON COUNTY TIME. THANK YOU.

8

9 **SUP. MOLINA, CHAIR:** THANK YOU. SIR?

10

11 **SPEAKER:** HONORABLE SUPERVISORS, THANK YOU FOR GRANTING OUR  
12 REQUEST FOR EXTRA TIME TO BRING FORWARD WITNESSES WHO HAVE  
13 MORE INFORMATION. IT'S AN HONOR TO PARTICIPATE IN THE PROCESS-  
14 - THANK YOU. IT'S AN HONOR TO PARTICIPATE IN THE PROCESS AND  
15 WE FEEL THAT YOU HAVE DONE ALL THAT YOU COULD REASONABLY DO AT  
16 THIS POINT TO TRY AND ASSURE A FAIR OUTCOME. WE ACCEPT THE  
17 RESULTS AS THEY STAND AND WE'D LIKE TO THANK YOU.

18

19 **SUP. MOLINA, CHAIR:** THANK YOU.

20

21 **SUP. MOLINA, CHAIR:** SORRY WE COULDN'T MEET ALL OF YOUR NEEDS.  
22 I THINK PROBABLY HAVING SOMEONE RESPONSIBLE FOR IT IS A GOOD  
23 THING. WE'LL ASK THE C.A.O. TO SEE IF HE CAN CREATE A BETTER  
24 PROCESS THAT WOULD AT LEAST CREATE SOME SUPERVISION, ALTHOUGH



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1 IT WOULD PROBABLY BE QUITE DIFFICULT, BUT WE SHOULD TRY TO DO  
2 SO.

3

4 **SPEAKER:** THANK YOU VERY MUCH, SUPERVISOR MOLINA.

5

6 **SUP. MOLINA, CHAIR:** THANK YOU, SIR. SUPERVISOR ANTONOVICH?

7

8 **SUP. ANTONOVICH:** MOVE THE ITEM.

9

10 **SUP. MOLINA, CHAIR:** MOVED BY SUPERVISOR ANTONOVICH, SECONDED  
11 BY SUPERVISOR KNABE. IF THERE'S NO OBJECTION, SO ORDERED.

12

13 **SUP. ANTONOVICH:** ITEM NUMBER 29.

14

15 **SUP. MOLINA, CHAIR:** ON ITEM 29, WE WERE HOLDING IT FOR DR.  
16 GARTHWAITE.

17

18 **SUP. ANTONOVICH:** HE'S ARRIVED, I'VE BEEN TOLD.

19

20 **SUP. MOLINA, CHAIR:** I'M ASKING THAT IT BE CONTINUED BUT I  
21 DON'T HAVE A PROBLEM-- I DON'T HAVE A PROBLEM IF YOU WANT TO  
22 ASK QUESTIONS. I'M JUST NOT PREPARED TO VOTE ON IT. I HAVE  
23 OTHER QUESTIONS.

24

25 **SUP. ANTONOVICH:** 29.



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1

2 **SUP. MOLINA, CHAIR:** OH, THE DEPARTMENT WANTS TO CONTINUE IT.

3

4 **SUP. ANTONOVICH:** JUST HOLD IT?

5

6 **SUP. MOLINA, CHAIR:** NO. THE DEPARTMENT WANTS TO CONTINUE IT AS  
7 WELL.

8

9 **SUP. MOLINA, CHAIR:** ALL RIGHT. THEN WE WILL CONTINUE ITEM 29.

10

11 **SUP. ANTONOVICH:** ALLOWED TO ASK ANY QUESTIONS OR ASK THE  
12 QUESTIONS?

13

14 **SUP. MOLINA, CHAIR:** I'M NOT GOING TO-- I'M GOING TO HOLD OFF.  
15 DID YOU WANT TO ASK QUESTIONS? ALL RIGHT. DR. GARTHWAITE, WE  
16 WILL CONTINUE THE ITEM BUT WE DO HAVE A QUESTION FROM  
17 SUPERVISOR ANTONOVICH.

18

19 **SUP. ANTONOVICH:** DOCTOR, THE PROPOSAL BEFORE US TODAY, IS THIS  
20 GOING TO REPLACE THE CONTRACT WITH RAD IMAGE MEDICAL GROUP?

21

22 **DR. THOMAS GARTHWAITE:** THIS-- THE ANSWER IS IT WILL AUGMENT, I  
23 BELIEVE. I DON'T KNOW THAT IT WILL REPLACE IT BUT I WOULD LIKE  
24 TO GO BACK AND DOUBLE CHECK THAT PART.

25



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1   **SUP. ANTONOVICH:** OKAY. SO FOR NEXT WEEK OR-- AND THEN WILL YOU  
2   BE CONDUCTING AN R.F.P. PROCESS FOR SOLICITATION OF RADIOLOGY  
3   SERVICES?

4

5   **DR. THOMAS GARTHWAITE:** CORRECT. IT WAS OUR RECOMMENDATION,  
6   UNDER THE BROADER RECOMMENDATIONS WE BROUGHT FORWARD FOR KING  
7   DREW MEDICAL CENTER, THAT WE LOOK TO CONTRACT OUT THE  
8   EMERGENCY ROOM, RADIOLOGY AND SO FORTH, SO WE WOULD LOOK TO  
9   THAT BROAD CONTRACTING OUT WITH REGARDS TO RADIOLOGY IN  
10   PARTICULAR.

11

12   **SUP. KNABE:** BUT THIS IS A SOLE-SOURCE CONTRACT.

13

14   **DR. THOMAS GARTHWAITE:** THIS-- RIGHT. THIS IS TO PROVIDE  
15   ONGOING SERVICES SO THAT WE CAN CATCH UP OUR BACKLOG. I WOULD  
16   SAY THAT WE HAVE HAD SOME SUCCESS NOW GETTING ENOUGH RADIOLOGY  
17   COVERAGE THAT A BACKLOG OF SEVERAL THOUSAND INTERPRETATIONS  
18   HAS NOW BEEN REDUCED TO-- I THINK LAST WEEK'S NUMBER WAS 32,  
19   SO WE'RE ESSENTIALLY CAUGHT UP NOW AND THIS IS TO PROVIDE THAT  
20   KIND OF ONGOING SERVICE, AS WELL AS THE CAPABILITY OF BRINGING  
21   A RADIOLOGIST IN ON-CALL AND SOME OTHER KINDS OF RADIOLOGY  
22   SERVICES.

23

24   **SUP. ANTONOVICH:** THE-- IN MAY, YOU HAD REPORTED THAT THE  
25   DEPARTMENT WAS WORKING WITH KING DREW AND OTHER COUNTY





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1 FACILITIES TO DEVELOP A SOLICITATION TO IDENTIFY SOLUTIONS TO  
2 THE ACUTE PROBLEMS AND GENERAL SHORTAGE OF RADIOLOGISTS ACROSS  
3 THE HEALTH DEPARTMENT AND THAT'S THE R.F.P. THAT YOU'RE GOING  
4 TO BE KEEPING OUT?

5

6 **DR. THOMAS GARTHWAITE:** RIGHT. WE'VE HAD A COUPLE OF MEETINGS,  
7 ONE OF ALL THE RADIOLOGY-- ALL OF THE RADIOLOGISTS ACROSS THE  
8 DEPARTMENT OF HEALTH SERVICES, SO WE'RE LOOKING AT A SHORTER-  
9 TERM RELATIONSHIP TO MAKE SURE THAT WE GET ALL THE X-RAYS  
10 INTERPRETED IN THE SHORT TERM BUT THEN WE'RE LOOKING AT A  
11 BROADER VIEW OF RADIOLOGY ACROSS THE DEPARTMENT WITH A SPECIAL  
12 EMPHASIS ON MAKING SURE THAT THESE SERVICES CONTINUE AT KING  
13 DREW.

14

15 **SUP. ANTONOVICH:** WHO IS GOING TO ENSURE THAT THE RADIOLOGY  
16 REPORTS ARE SIGNED AND PLACED IN THE PATIENT'S MEDICAL CHART?

17

18 **DR. THOMAS GARTHWAITE:** WELL, THAT'S AN ONGOING FUNCTION OF A  
19 HOSPITAL AND THE MEDICAL RECORDS COMMITTEE. THAT'S THEIR  
20 RESPONSIBILITY TO ASSURE THAT ALL TESTS ARE APPROPRIATELY  
21 PLACED IN...

22

23 **SUP. ANTONOVICH:** BUT YOU HAD REPORTED THERE WERE 12,000  
24 REPORTS THAT WEREN'T OFFICIALLY SIGNED BY RADIOLOGY?

25



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1    **DR. THOMAS GARTHWAITE:** IT WAS 1,200. YEAH, 1,200 OR SO.

2

3    **SUP. ANTONOVICH:** 1,200 NOT 12,000?

4

5    **DR. THOMAS GARTHWAITE:** YEAH. AND THEY WERE-- THOSE WERE JUST  
6    SIMPLY NOT-- THEY DID NOT HAVE A FINAL READING. THEY USUALLY  
7    HAD AN IMMEDIATE READING BUT FINAL READINGS TAKE A LITTLE BIT  
8    LONGER THAT REQUIRE DICTATION AND SIGNATURE. AND, LIKE I SAY,  
9    I THINK WE'RE, AS OF LAST WEEK, WE'RE NOW VIRTUALLY CAUGHT UP.

10

11    **SUP. ANTONOVICH:** SO WHEN C.M.S. CITED YOU AS 12,000 BUT NOW  
12    YOU'RE DOWN TO 1,200?

13

14    **DR. THOMAS GARTHWAITE:** I'M NOT AWARE OF EVER-- THE NUMBER  
15    12,000. WE'RE DOWN TO 32 LAST WEEK. I KNOW THAT MUCH.

16

17    **SUP. ANTONOVICH:** IT WAS IN THE REPORT. HOW IS THE DEPARTMENT  
18    OVERSIGHT WILL ENSURE THAT THIS DOCTOR WILL WORK THE HOURS AND  
19    THE SHIFTS THAT HE IS RESPONSIBLE FOR?

20

21    **DR. THOMAS GARTHWAITE:** I THINK THIS CONTRACTING, CONTRAST TO  
22    SOME OF OUR PREVIOUS CONTRACTS, IS A VOLUME-DRIVEN CONTRACT  
23    WHERE THERE'S A BASIC AMOUNT OF MONEY AND THEN THEY ONLY GET  
24    PAID FOR ACTUALLY READING FILMS.

25



**The Meeting Transcript of  
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1   **SUP. ANTONOVICH:** AND THE PROCESS THAT WILL TAKE PLACE IN  
2   REVIEWING THE RADIOLOGY FIRM, WHO AT KING DREW WILL REVIEW THE  
3   PRELIM RADIOLOGY REPORTS AND WHO WILL BE A PART OF THE  
4   CONSULTATION OF THOSE RADIOLOGY REPORT READINGS?

5

6   **DR. THOMAS GARTHWAITE:** I'M SORRY? I DIDN'T-- I DIDN'T QUITE  
7   FOLLOW THAT.

8

9   **SUP. ANTONOVICH:** WHO IS GOING TO BE INVOLVED IN REVIEWING  
10   THOSE RADIOLOGY REPORTS AND ENSURING THAT THEY'RE PART OF THE  
11   CONSULTATION?

12

13   **DR. THOMAS GARTHWAITE:** THE-- EACH DEPARTMENT IN THE HOSPITAL  
14   HAS A RESPONSIBILITY TO DO PEER REVIEW AND QUALITY ASSURANCE,  
15   SO RADIOLOGY DEPARTMENT IS REQUIRED TO DO RANDOM PULLS OF X-  
16   RAYS AND HAVE THEM DOUBLE READ TO MAKE SURE THAT THEY'RE OF  
17   GOOD ACCURACY.

18

19   **SUP. ANTONOVICH:** THOSE ARE MY QUESTIONS.

20

21   **SUP. MOLINA, CHAIR:** SUPERVISOR BURKE.

22

23   **SUP. BURKE:** WILL THERE BE ANY ATTEMPT TO REINSTATE THE  
24   ACCREDITATION OF RADIOLOGY AS A RESIDENCY?

25



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The Los Angeles County Board of Supervisors**

1 **DR. THOMAS GARTHWAITE:** I DON'T BELIEVE SO. WE'RE HAVING GREAT  
2 DIFFICULTY MAINTAINING A RADIOLOGY AT OUR TWO LARGER  
3 FACILITIES. THE REQUIREMENTS FOR STAFF PHYSICIANS, THE RATIO  
4 OF STAFF PHYSICIANS AND PROFESSORS TO RESIDENTS IS RATHER  
5 STRICT AND YOU NEED A LOT OF STAFF RADIOLOGISTS PER RESIDENT  
6 AND IT REALLY CHALLENGES US TO HAVE ENOUGH VOLUME TO MAINTAIN  
7 THAT RESIDENCY. SO MY SENSE IS THAT, IF WE BRING RESIDENTS  
8 BACK IN RADIOLOGY AT KING DREW, IT WILL BE AS PART OF A  
9 ROTATION FROM ANOTHER PROGRAM. I THINK WE'RE HAVING  
10 DISCUSSIONS WITH DREW ABOUT THAT AS A POSSIBILITY BUT IT'S A  
11 STANDALONE RESIDENCY. I DON'T SEE ANY WAY WE COULD DO THAT.

12

13 **SUP. BURKE:** IT WOULD REQUIRE AN APPLICATION FOR ACCREDITATION,  
14 RIGHT? IT WOULD NOT COME UP REGULARLY WITH THE A.C.G.M.E.  
15 INSTITUTIONAL...

16

17 **DR. THOMAS GARTHWAITE:** WELL, WE WOULD HAVE TO FIRST, BEFORE WE  
18 COULD REOPEN IT, WE WOULD HAVE TO GET A.C.G. FULL  
19 ACCREDITATION...

20

21 **SUP. BURKE:** INSTITUTIONAL, RIGHT?

22

23 **DR. THOMAS GARTHWAITE:** INSTITUTIONAL. AND THEN WE WOULD HAVE  
24 TO BUILD A PROGRAM BACK WITH THE RIGHT NUMBER AND TYPES OF  
25 PROFESSORS AND TEACHERS WITH THE RIGHT BACKGROUND. SO I JUST



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1 THINK IT'S REALLY NOT GOING TO BE POSSIBLE AND WE'RE LOOKING  
2 AT HOW MANY RESIDENCIES WE CAN RUN AND WHETHER WE NEED ONE FOR  
3 THE SYSTEM OR-- WE'RE RIGHT CURRENTLY RUNNING TWO.

4

5 **SUP. BURKE:** HOW MANY RADIOLOGISTS DO WE HAVE NOW EMPLOYED AT  
6 KING DREW, COUNTY PEOPLE? ARE THERE ANY?

7

8 **DR. THOMAS GARTHWAITE:** I CAN'T SAY. I CAN FIND THE  
9 INFORMATION. NOT TOO MANY.

10

11 **SUP. BURKE:** WHEN IT COMES BACK, YOU'LL LET US KNOW AND ALSO  
12 YOU SAY THAT THIS CONTRACT IS PER READING AND THE TECHNICIANS  
13 ACTUALLY DO THE X-RAY ITSELF AND THEN THE RADIOLOGIST IS DOING  
14 THE READING OF THE X-RAY, IS THAT-- OR THE INTERPRETATIONS?

15

16 **DR. THOMAS GARTHWAITE:** THE INTERPRETATION OF THE-- CORRECT.  
17 AND I BELIEVE THERE'S JUST A BASELINE AMOUNT COVERS SOME OF  
18 THE ADMINISTRATIVE COSTS AND SOME OF IT BEING AVAILABLE BUT  
19 THE BULK OF ALL OF THE FUNDING IS BASED ON THE WORK ACTUALLY  
20 ACCOMPLISHED.

21

22 **SUP. KNABE:** I HAD A COUPLE QUESTIONS, DR. GARTHWAITE. AS I  
23 MENTIONED EARLIER, SINCE THIS IS A SOLE-SOURCE CONTRACT, HOW  
24 DO WE KNOW THAT WE GET THE BEST PRICE AND, YOU KNOW, BEST



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1 SERVICE THAT'S AVAILABLE? I MEAN, WE'VE HAD A PROCESS HERE  
2 WHERE WE COULD HAVE GONE OUT TO COMPETITIVE BID.

3

4 **DR. THOMAS GARTHWAITE:** YEAH. I THINK THAT, UMM, WHAT I WOULD  
5 SAY IS THAT WE'VE WORKED HARD TO SOLICIT OTHER-- OTHER  
6 RADIOLOGISTS AND OTHER GROUPS TO DO THIS COVERAGE, AT LEAST IN  
7 THE SHORT-TERM, AND HAVE BEEN STRUGGLING WITH THIS FOR, I  
8 THINK, 4 TO 6 MONTHS SO NAVIGANT HAS...

9

10 **SUP. MOLINA, CHAIR:** WHO TURNED YOU DOWN, DR. GARTHWAITE?

11

12 **DR. THOMAS GARTHWAITE:** I CAN GET-- NAVIGANT WOULD HAVE THAT  
13 INFORMATION BUT I CAN GET THAT.

14

15 **SUP. KNABE:** OKAY. I MEAN, SOME OF THEM THAT YOU CAN'T ANSWER  
16 TODAY, I MEAN, I'D LIKE THEM ADDRESSED IF IT'S COMING BACK  
17 NEXT WEEK BECAUSE THE OTHER THING IS, IS HOW THIS SERVICE RATE  
18 COMPARES, YOU KNOW, IF THIS PARTICULAR VENDOR COMPARES WITH  
19 OUR VENDORS AT OUR OTHER COUNTY HOSPITALS AS WELL, TOO,  
20 PARTICULARLY SINCE IT'S SOLE SOURCE. THE OTHER ONE-- THE OTHER  
21 QUESTION THAT I NEED ADDRESSED IS THE CONTRACT STATES THAT THE  
22 VENDOR SERVICE DOES NOT INCLUDE OVERALL PHYSICIAN  
23 RESPONSIBILITY FOR RADIOLOGICAL SERVICES. EXPLAIN WHAT THAT  
24 MEANS AND ARE THERE GOING TO BE SUFFICIENT STAFF RADIOLOGISTS  
25 ON DUTY TO EXERCISE THAT RESPONSIBILITY ON A FULL-TIME BASIS?



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1

2 **DR. THOMAS GARTHWAITE:** I THINK I WOULD NEED TO TALK TO  
3 NAVIGANT TO SEE WHAT THEIR PLAN FOR THE-- HOW MUCH OF THIS  
4 CONTRIBUTES TO COVERAGE VERSUS THE READINGS, RIGHT.

5

6 **SUP. KNABE:** WELL, BECAUSE THAT'S SIGNIFICANT ON THIS DOLLAR  
7 AMOUNT AND I DON'T REALLY UNDERSTAND WHEN IT SAYS IT DOES NOT  
8 INCLUDE THE OVERALL PHYSICIAN RESPONSIBILITY, SO I THINK THAT  
9 ISSUE, ONE, NEEDS TO BE ADDRESSED AS WELL AS WHETHER THERE  
10 WILL BE BE SUFFICIENT RADIOLOGISTS ON DUTY TO EXERCISE THAT  
11 RESPONSIBILITY. SO...

12

13 **DR. THOMAS GARTHWAITE:** RIGHT. WELL, WE'LL GET THOSE ANSWERS  
14 AND WE'LL BRING BACK SOME FOLKS WHO HAVE BEEN BUSY IN THE  
15 NEGOTIATIONS.

16

17 **SUP. KNABE:** OKAY. MADAM CHAIR, THOSE ARE ALL MY QUESTIONS.

18

19 **SUP. MOLINA, CHAIR:** ALL RIGHT.

20

21 **SUP. ANTONOVICH:** SECOND.

22

23 **SUP. MOLINA, CHAIR:** ALL RIGHT. WE WILL CONTINUE THAT ITEM.  
24 NEXT ITEM.

25





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1    **SUP. ANTONOVICH:** 46. SHERIFF.

2

3    **SUP. MOLINA, CHAIR:** ITEM NUMBER 46, PLEASE. MR. BAXTER, YOU  
4    HELD THAT ITEM?

5

6    **PETER BAXTER:** THANK YOU. MADAM CHAIR, MEMBERS OF YOUR  
7    HONORABLE BOARD, MR. JANSSEN, LADIES AND GENTLEMEN, MY NAME IS  
8    PETER BAXTER AND I LIVE IN LOS ANGELES. IT IS RESPECTFULLY  
9    SUBMITTED THAT THIS AGENDA ITEM IS A REQUEST FOR THE SHERIFF'S  
10   SPECIAL APPROPRIATION FUND. LIEUTENANT AL GROTEFUND OF THE  
11   DEPARTMENT OF THE SHERIFF IS IDENTIFIED IN THE NEWS MEDIA AS  
12   BEING THE SUPERVISING OFFICER IN THE INVESTIGATION OF THE FIRE  
13   IN CARSON ON SEPTEMBER 04, 2005, WHEN FIVE CHILDREN PERISHED  
14   IN THAT FIRE. WHAT IS TO BE NOTED IS THAT THERE IS NO  
15   REFERENCE IN THE INVESTIGATION BY THE DEPARTMENT OF THE  
16   SHERIFF OF THE MEANS AND THE METHOD USED BY THE COUNTY FIRE  
17   DEPARTMENT TO PUT OUT THE FIRE. MISS SAMANTHA GONZAGA-- EXCUSE  
18   ME. DO YOU MIND KEEPING IT DOWN A BIT? I'D LIKE TO DO THIS  
19   WITHOUT COMPETING WITH YOU. THANK YOU. MISS SAMANTHA GONZAGA,  
20   STAFF WRITER FOR THE LONG BEACH PRESS TELEGRAM REPORTS THE  
21   FIRE AS EXTENDING FROM 8:22 A.M. UNTIL 8:36 A.M. THAT IS A  
22   TOTAL OF 14 MINUTES. THE DEATH OF THE CHILDREN WAS CAUSED BY  
23   SMOKE INHALATION, LIEUTENANT GROTEFUND IS QUOTED AS SAYING BY  
24   THE PRESS TELEGRAM IN THEIR SEPTEMBER 08, 2005 EDITION. SMOKE  
25   PREVENTS OXYGEN FROM REACHING THE VICTIMS WHO ARE TRAPPED IN



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1 THE BURNING BUILDING. HUMAN RESPIRATION IS BLOCKED BY SMOKE  
2 AND, AFTER FOUR MINUTES, PERHAPS LESS, OF BEING DEPRIVED OF  
3 OXYGEN, THE VICTIM DIES. THERE IS A METHOD OF ELIMINATING  
4 SMOKE FROM A FIRE BY INJECTING STEAM INTO THE BURNING AREA.  
5 INJECTING STEAM INTO THE BURNING AREA ALSO PUTS OUT THE FIRE  
6 INSTANTLY. WATER DOES NOTHING TO PREVENT PRETTY FRESH AIR FROM  
7 REACHING THE FIRE. ONLY A GAS LIKE STEAM PREVENTS FRESH AIR  
8 FROM FEEDING A FIRE. THE TIME PERIOD IS CRITICAL FOR FIRE  
9 VICTIMS AND I WOULD LIKE TO POINT OUT THAT THE SUPERVISOR FOR  
10 THE THIRD DISTRICT, THE HONORABLE ZEV YAROSLAVSKY, IS QUOTED  
11 IN "THE LOS ANGELES TIMES" OF YESTERDAY IN THE PROFILE OF MR.  
12 MERRICK BOB, AND HE SAYS THIS, "YOU NEED--" I'M QUOTING  
13 SUPERVISOR ZEV YAROSLAVSKY, AS QUOTED BY "THE LOS ANGELES  
14 TIMES", "YOU NEED SOMEBODY FROM OUTSIDE THE STRUCTURE WHO IS  
15 FREE TO CALL THEM AS HE SEES THEM." AND I MIGHT POINT OUT TO  
16 YOU, MADAM PRESIDENT, THE FIRE CHIEF NEVER COMES OUT HERE,  
17 NEVER IN YEARS HAS HE COME OUT HERE TO DISCUSS WHAT I'M  
18 TALKING ABOUT AND, IF IT IS ANYBODY WHO IS PROTECTED IN THIS  
19 COUNTY FROM ANY CRITICISM WHATSOEVER, THEN IT'S THE FIRE  
20 CHIEF. ALL OF WHICH IS RESPECTFULLY SUBMITTED AND I THANK YOU,  
21 MADAM PRESIDENT.

22

23 **SUP. MOLINA, CHAIR:** THANK YOU SO MUCH. MOVED BY SUPERVISOR  
24 ANTONOVICH, SECONDED BY SUPERVISOR BURKE. IF THERE'S NO  
25 OBJECTION, SO ORDERED.



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1

2 **SUP. ANTONOVICH:** ITEM NUMBER 51, WE DID. ITEM 48, I HAVE  
3 QUESTIONS.

4

5 **SUP. MOLINA, CHAIR:** ITEM NUMBER 48. THAT'S BEEN HELD BY  
6 SUPERVISOR ANTONOVICH. DR. GARTHWAITE, I THINK WE HAVE SOME  
7 QUESTIONS ON THIS ITEM, PLEASE.

8

9 **SUP. ANTONOVICH:** QUESTION. DOES THE KING DREW HOSPITAL  
10 ADVISORY BOARD MAKE RECOMMENDATIONS INDEPENDENT FROM YOUR  
11 DEPARTMENT?

12

13 **DR. THOMAS GARTHWAITE:** I BELIEVE THAT'S THE WAY THE STRUCTURE  
14 THAT THE HOSPITAL ADVISORY BOARD IS ADVISORY-- I BELIEVE THAT  
15 THE HOSPITAL ADVISORY BOARD IS ADVISORY TO THE BOARD OF  
16 SUPERVISORS. IT DOES PROVIDE, IN A WAY, PROVIDES ADVICE TO THE  
17 DEPARTMENT BECAUSE I SIT ON THE BOARD AND ATTEND THE MEETINGS.

18

19 **SUP. ANTONOVICH:** IF THE DEPARTMENT OR KING DREW MANAGEMENT  
20 HAVE A CONFLICT WITH THE ADVISORY BOARD'S RECOMMENDATIONS,  
21 WHAT IS THE MECHANISM IN WHICH THE DEPARTMENT'S CONCERNS ARE  
22 ADDRESSED BEFORE THE RECOMMENDATIONS? IS THERE A MINORITY  
23 REPORT OR WHATEVER INCLUDED?

24



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1 **DR. THOMAS GARTHWAITE:** YES. PERHAPS THE ONLY-- SO FAR, I THINK  
2 THE ONLY SIGNIFICANT TIME THAT THIS HAS COME UP WITH REGARDS  
3 TO THE RECOMMENDATIONS ON THE FUTURE OF KING DREW MEDICAL  
4 CENTER THAT THE DEPARTMENT BROUGHT TO THE BOARD SEVERAL WEEKS  
5 AGO AND, IN THAT CASE, THE BOARD BASICALLY ACTED TO SAY THAT  
6 THEY FELT THEY DIDN'T HAVE SUFFICIENT TIME TO CONSIDER THE  
7 RECOMMENDATIONS AND COULDN'T APPROVE THEM AND CAME OUT AGAINST  
8 THEM UNTIL THEY HAD SUCH TIME AS TO CONSIDER THEM AND PLAN TO  
9 DO THAT A WEEK FROM TOMORROW TO RECONSIDER THOSE MOTIONS. SO  
10 WHAT I GUESS I'M SAYING IS THAT I BRING FORWARD THE  
11 DEPARTMENT'S RECOMMENDATIONS, ATTEMPT TO WORK WITH THE BOARD,  
12 AND I WOULD READILY SAY THAT, BEING THAT IT'S A NEW PROCESS  
13 AND A NEW BOARD THAT'S MATURING ON ITS OWN, THAT I HAVE  
14 BROUGHT-- ATTEMPTED TO BRING THOSE RECOMMENDATIONS THROUGH  
15 THAT BOARD BUT THEY ARE A BOARD THAT MEETS MAYBE ONCE A MONTH  
16 OR NOW TWICE OR THREE TIMES A MONTH ON OCCASION IN MORE  
17 EMERGENT SESSION BUT THEY HAVEN'T BEEN ABLE TO PROVIDE SORT OF  
18 SOMETIMES A TIMELY RESPONSE THAT THE DEPARTMENT IS USED TO  
19 TRYING TO PROVIDE FOR THIS BOARD.

20  
21 **SUP. ANTONOVICH:** SO YOU'RE SAYING THERE'S NO MECHANISM FOR YOU  
22 TO PRESENT YOUR VIEWS BEFORE THIS BOARD?

23



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1 **DR. THOMAS GARTHWAITE:** WELL, THERE IS AND WE TRY-- I TRY TO  
2 KEEP THAT BOARD INFORMED. WE HAVE, FOR INSTANCE, REGULAR CALLS  
3 WITH HECTOR...

4

5 **SUP. ANTONOVICH:** NO, OUR BOARD. I'M TALKING ABOUT OUR BOARD.  
6 IS THERE ANY-- THE ADVISORY BOARD MAKES A RECOMMENDATION,  
7 WHICH YOU OPPOSE. THERE IS NO MEANS FOR YOU TO COMMUNICATE  
8 YOUR REASONING TO THIS BOARD OF SUPERVISORS AS TO YOUR  
9 POSITION?

10

11 **DR. THOMAS GARTHWAITE:** WELL, I CERTAINLY FEEL FREE TO EXPRESS  
12 THAT. IT'S-- THERE-- THE BOARD ITSELF HAS NOT-- HAS NOT-- WHEN  
13 IT PUTS FORWARD ITS RECOMMENDATIONS, DOES NOT APPEAR TO, SO  
14 FAR, PUT FORWARD THE DISSENTING VIEW AND THE REASONS WHY IN  
15 THEIR REPORT TO YOUR BOARD.

16

17 **SUP. ANTONOVICH:** THAT'S TRUE, BUT WHEN THEY MAKE A  
18 PRESENTATION RECOMMENDATION TO THIS GOVERNING BOARD, YOU ARE  
19 AWARE OF THAT BECAUSE YOU ARE A MEMBER OF THE ADVISORY BOARD?

20

21 **DR. THOMAS GARTHWAITE:** CORRECT.

22

23 **SUP. ANTONOVICH:** WOULD YOU NOT THEN SEND A COMMUNICATION TO  
24 THE BOARD OF SUPERVISORS ARTICULATING YOUR POINTS OF VIEW SO,  
25 WHEN WE HAVE THIS DISCUSSION ON THEIR RECOMMENDATION, WE HAVE



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1 YOUR INPUT PRIOR TO HAVING YOU COME UP AND ASKING YOU THE  
2 QUESTION.

3

4 **DR. THOMAS GARTHWAITE:** I THINK THAT'S AN EXCELLENT IDEA. I  
5 THINK THERE'S ONLY ONE OTHER THING THAT I VOTED AGAINST  
6 DIFFERENT THAN THE BOARD VOTED, AND THAT WAS ON THE APPROVAL  
7 OF A NEW MEMBER AND I FELT THAT THE NOMINATING COMMITTEE HAD  
8 NOT PROVIDED ME WITH A RESUME OR HAD AN OPPORTUNITY, ANY TIME  
9 TO CONSIDER THAT INDIVIDUAL, SO I COULDN'T VOTE IN FAVOR OR  
10 AGAINST-- I MEAN, I VOTED AGAINST BECAUSE I DIDN'T HAVE TIME  
11 TO CONSIDER THAT INDIVIDUAL. THE ONLY OTHER TIME I VOTED  
12 DIFFERENTLY THAN THE BOARD RELATED TO THE RECOMMENDATIONS OF  
13 THE FUTURE OF KING DREW AND I DID PROVIDE, OBVIOUSLY, A  
14 DETAILED RECOMMENDATIONS WITH REGARD TO THAT.

15

16 **SUP. ANTONOVICH:** IT WOULD SEEM THAT YOU OUGHT TO COMMUNICATE  
17 WHY YOU DEVIATE FROM A RECOMMENDATION SO THAT WE HAVE THAT  
18 INFORMATION EXCLUDING THEY WANT TO MEET ON A MONDAY INSTEAD OF  
19 A TUESDAY OR A TUESDAY INSTEAD OF A WEDNESDAY.

20

21 **DR. THOMAS GARTHWAITE:** RIGHT. I ABSOLUTELY AGREE AND I'LL BE  
22 SURE THAT THAT HAPPENS.

23

24 **SUP. ANTONOVICH:** WHAT CONCERNS DO YOU HAVE ON THE STRUCTURE OF  
25 THIS ADVISORY BOARD?



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1

**DR. THOMAS GARTHWAITE:** I THINK MY MAJOR CONCERN AT THE PRESENT  
TIME IS RELATED TO HOW THE BOARD IS CONSTRUCTED IN TERMS OF  
ITS MEMBERSHIP AND WHETHER IT IS, IN THE END, WILL REPRESENT A  
SET OF PEOPLE OF EXPERTISE IN HEALTHCARE WHO WILL GUIDE THE  
OPERATIONS OF THE FACILITY OR WHETHER IT REPRESENTS MORE OF A  
STAKEHOLDER AND COMMUNITY BOARD THAT WOULD BE, YOU KNOW,  
ARGUING IN FAVOR OF, YOU KNOW, THE OVERALL CARE AND ITS  
RELATIONSHIP TO COMMUNITY NEED, WHETHER YOU CAN HAVE BOTH OF  
THOSE ON ONE BOARD AND HAVE IT BE FUNCTIONAL. I THINK THAT HAS  
TO BE DEFINED, AND I THINK THAT-- I THINK, IN THE BEGINNING,  
THE SENSE WAS THE GOAL WAS TO BE MORE OF AN OPERATIONAL BOARD  
FULL OF EXPERTISE. I THINK I'VE SEEN THE ADDITIONAL MEMBERS  
THAT HAVE BEEN ADDED ATTENDING MORE FOR COMMUNITY INPUT AND  
THERE'S ACTUALLY BEEN DISCUSSION ABOUT GETTING THE RIGHT  
AMOUNT OF COMMUNITY INPUT. I THINK THAT IT'S A REAL CHALLENGE  
IF YOU TRIED IT TO BE BOTH AND I THINK IT COULD BE A REAL  
CHALLENGE, BUT I THINK WE STILL NEED THE OPERATIONAL INPUT AS  
OPPOSED TO THE COMMUNITY INPUT. THAT'S NOT TO SAY WE DON'T  
NEED A COMMUNITY INPUT BUT I DON'T BELIEVE THAT THAT'S  
NECESSARILY WHAT THE ROLE OF THE HOSPITAL ADVISORY BOARD  
SHOULD BE. SO I WOULD FAVOR THE EXPERTISE IN A SEPARATE  
PROCESS THAT'S VERY AGGRESSIVE TO GET COMMUNITY INPUT AS WELL.

24





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1   **SUP. ANTONOVICH:** IS IT COMMON FOR A PRIVATE HOSPITAL ADVISORY  
2   BOARD TO HAVE THE CHIEF EXECUTIVE OFFICER TO BE A MEMBER OF  
3   THAT BODY? VOTING MEMBER?

4

5   **DR. THOMAS GARTHWAITE:** I THINK CERTAINLY-- IT IS CERTAINLY-- I  
6   THINK IT IS, IN MY EXPERIENCE, UNCOMMON THAT THE CHIEF  
7   EXECUTIVE OFFICER THAT REPORTS TO A BOARD HAVE VOTES ON THAT  
8   BOARD. IN GENERAL, THE BOARDS OVERSEE THE FUNCTION, APPOINT  
9   THE C.E.O., ASSESS THEIR PERFORMANCE AND, ON OCCASION, REMOVE  
10   C.E.O.S BUT, IN GENERAL, THE C.E.O. IS NOT A VOTING MEMBER OF  
11   THE BOARD.

12

13   **SUP. ANTONOVICH:** YOU COULD BE AN EX-OFFICIO BUT NOT A VOTING  
14   MEMBER?

15

16   **DR. THOMAS GARTHWAITE:** I THINK THAT'S THE USUAL EXPERIENCE.

17

18   **SUP. ANTONOVICH:** RIGHT, SO THIS IS AN EXCEPTION TO THE USUAL,  
19   A DEVIATION FROM THE USUAL EXPERIENCE.

20

21   **DR. THOMAS GARTHWAITE:** YES.

22

23   **SUP. ANTONOVICH:** IS THAT A MEANS OF FAILURE?

24



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1 **DR. THOMAS GARTHWAITE:** I DIDN'T-- IN THE DISCUSSION OF THE  
2 BYLAWS, I DIDN'T STRONGLY OPPOSE THIS AT THE TIME IN PART  
3 BECAUSE I SAW THE C.E.O. VOTE AS SOMETHING MORE OF A VOTE OF  
4 EXPERTISE IN RELATION TO THE COMMENTS I JUST MADE ON THE  
5 DIFFERENCE BETWEEN EXPERT BOARD VERSUS, YOU KNOW, COMMUNITY  
6 BOARD. BUT I THINK, IF I WERE DRAWING IT UP IDEALLY AND  
7 DRAWING ON THE EXPERIENCE OF MANY OTHER BOARDS, THAT I  
8 PROBABLY WOULD HAVE THE C.E.O. NOT HAVE A VOTING MEMBERSHIP.

9

10 **SUP. ANTONOVICH:** WILL THE CURRENT STRUCTURE HINDER YOUR  
11 ABILITY TO MAKE INDEPENDENT DECISIONS IF YOU'RE NOT IN  
12 AGREEMENT WITH THEIR RECOMMENDATIONS?

13

14 **DR. THOMAS GARTHWAITE:** WELL, I DON'T THINK IT-- IT SHOULD. I  
15 CAN CERTAINLY-- I FEEL COMFORTABLE BRINGING ISSUES TO THE  
16 HOSPITAL ADVISORY BOARD AND ALSO TO THIS BOARD AND I THINK  
17 IT'S IMPORTANT TO GET THEIR VIEW. THERE ARE MULTIPLE MEMBERS  
18 OF THAT BOARD WHO HAVE GREAT EXPERTISE IN HEALTHCARE AND WHOSE  
19 OPINIONS I'M VERY INTERESTED IN BUT, IN THE END, YOU'RE PAYING  
20 ME AND I OWE YOU MY BEST JUDGMENT, EVEN IF THAT'S IN  
21 DISAGREEMENT WITH ALL THE MEMBERS AND EVEN THE EXPERTS ON THAT  
22 BOARD.

23

24 **SUP. ANTONOVICH:** AND WHAT IS THE BUDGET FOR TRAVEL AND OTHER  
25 ADMINISTRATIVE COSTS, EXPENSES FOR THIS BOARD?



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1

2 **DR. THOMAS GARTHWAITE:** CURRENTLY SPENDING VERY LITTLE. I THINK  
3 THERE'S REALLY ONLY ONE MEMBER THAT HAS ANY SIGNIFICANT COST,  
4 DR. KAISER, AND HE MAY EVEN BE MOVING TO SOUTHERN CALIFORNIA,  
5 SO I THINK THAT WE HAVE A RELATIVELY LOW TRAVEL BUDGET AND  
6 ADMINISTRATIVE COSTS ARE, I THINK, BORNE OUT OF THE KING  
7 DREW'S C.E.O.'S BUDGET.

8

9 **SUP. ANTONOVICH:** WHAT'S THE MECHANISM, THOUGH, FOR KEEPING IT  
10 LOW?

11

12 **DR. THOMAS GARTHWAITE:** WELL, I THINK THAT, FOR THEM TO  
13 INFLUENCE THE SPENDING OF ANY MONEY ON THEMSELVES, IT WOULD  
14 REQUIRE THE C.E.O. TO GET THAT KIND OF APPROVAL AND WE'RE  
15 VERY-- WE'RE, I THINK, WE'RE QUITE WATCHFUL OF THAT. PLUS, IF  
16 THEY VOTED TO DO THAT, I WOULD BE THERE TO KNOW IT, SO I'LL  
17 KEEP MY EYE ON IT.

18

19 **SUP. ANTONOVICH:** AND WHO HAS OVERSIGHT, FISCAL OVERSIGHT FOR  
20 THE BODY?

21

22 **DR. THOMAS GARTHWAITE:** WELL, THE C.E.O. OF KING DREW DOES DO  
23 THE BULK OF THE MANAGEMENT OF HELPING TO SET THE AGENDA WITH  
24 THE CHAIRPERSON AND CURRENTLY IS PROVIDING THE ADMINISTRATIVE  
25 SUPPORT.



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1

2 **SUP. ANTONOVICH:** BUT DO WE HAVE REGULAR, MONTHLY AUDITS OR  
3 ANNUAL AUDITS OR SEMIANNUAL AUDITS OR...?

4

5 **DR. THOMAS GARTHWAITE:** I DON'T BELIEVE THERE IS ANY MECHANISMS  
6 SET UP TO AUDIT THAT PROCESS. I CAN LOOK INTO THAT.

7

8 **SUP. ANTONOVICH:** THE ADVISORY BOARD DOESN'T HAVE AUTHORITY  
9 OVER THE BUDGET OR THE KING DREW PERSONNEL AND ALL OF THEIR  
10 RESPONSIBILITIES AND ACCOUNTABILITY RESTS WITH THE DEPARTMENT  
11 TO-- WHO MAKES THE RECOMMENDATIONS TO THE BOARD AND IT'S THE  
12 BOARD-- BOARD OF SUPERVISORS AND I SEE THIS AS BEING  
13 COUNTERPRODUCTIVE AND HINDERING THE ABILITY OF THE DEPARTMENT  
14 TO MOVE FORWARD AND MAKE THE NECESSARY REFORMS AS REQUIRED BY  
15 THE J.C.A.H.O. AND C.M.S. ACCREDITATION INVESTIGATIONS. BUT--  
16 AND THAT'S WHY I ORIGINALLY HAD OPPOSED THIS WHEN THIS WAS  
17 BEFORE US AND STILL HAVE A FEELING THAT THIS IS  
18 COUNTERPRODUCTIVE AND THE RESOURCES WOULD BE BETTER SPENT IN  
19 THEY'RE MEETING THE CRITERIA OF THE J.C.A.H.O. AND THE C.M.S.  
20 FINDINGS.

21

22 **DR. THOMAS GARTHWAITE:** THE ONLY THING I COULD OFFER TO YOU IN  
23 TERMS OF THE POSITIVE ASPECTS THAT I SEE, CLEARLY, THE  
24 EXPERTISE OF DR. KAISER RUNNING THE QUALITY COMMITTEE HAS BEEN  
25 OF VALUE TO THE INSTITUTION. I THINK THE PERSONAL ENGAGEMENT



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1 OF DR. BURNS-BOLTON, WHO IS THE CHIEF NURSE AT CEDARS AND  
2 BEING INVOLVED IN TRYING TO RALLY OTHER NURSING LEADERSHIP IN  
3 THE COMMUNITY TO HELP US IN OUR RECRUITMENT CHALLENGES AT KING  
4 DREW HAS BEEN A POSITIVE. I THINK SOME OF THE COMPARATIVE  
5 STUDIES THAT MR. LOTT HAS BEEN ABLE TO ACCOMPLISH THROUGH HASK  
6 TO GIVE US SOME, YOU KNOW, SOME CONFIDENTIAL SALARY  
7 INFORMATION AND SO FORTH CAN BE HELPFUL WITH THE RECRUITMENT.  
8 SO THERE ARE SOME THINGS THAT I THINK-- THAT ARE VERY TANGIBLE  
9 THAT HAVE BEEN HELPFUL COMING OUT OF THE BOARD.

10

11 **SUP. ANTONOVICH:** THOSE ARE MY QUESTIONS, MADAM CHAIR.

12

13 **SUP. MOLINA, CHAIR:** SUPERVISOR KNABE.

14

15 **SUP. KNABE:** YEAH. I-- I GUESS, ONE, YOU ANSWERED THE QUESTION  
16 BUT I DO HAVE A CONCERN ABOUT THE H.A.B. RECOMMENDING THAT THE  
17 C.E.O. BE A VOTING MEMBER. THE ORIGINAL DIRECTION THAT I  
18 SUPPORTED, OBVIOUSLY, WAS AN ADVISORY BOARD MADE UP OF HEALTH  
19 EXPERTS AND SOMEWHAT A SENSE OF INDEPENDENCE. I THINK THE  
20 MIXTURE-- AND I KNOW IT'S-- WHAT WE'VE TRIED TO DO IS SORT OF  
21 MOLLIFY EVERYONE, THAT WE'RE MOVING AWAY FROM THAT  
22 INDEPENDENCE AND, YOU KNOW, AND THAT, YOU KNOW, THINGS LIKE  
23 THE BYLAWS ARE DIVERTING ATTENTION FROM J.C.A.H.O. AND C.M.S.  
24 REVIEWS AND FOCUSING ON MORE COMMUNITY KINDS OF ISSUES THAT  
25 ARE IMPORTANT BUT WE CERTAINLY SHOULD BE ABLE TO COME UP WITH



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1 A WAY TO BE ABLE TO ADDRESS THOSE INDEPENDENTLY OF THE  
2 ADVISORY BOARD. AS AN EXAMPLE, ITEM "S" ON THE DUTY STATEMENT  
3 INVOLVES THE DEVELOPMENT AND IMPLEMENTATION OF AN INFORMATION  
4 TECHNOLOGY PLAN YET, YOU KNOW, THE C.I.O. OR NO ONE ELSE IS,  
5 YOU KNOW, INDEPENDENTLY INVOLVED IN THAT PROCESS. AND WE  
6 CONTINUE TO MOVE FORWARD BUT WE ARE DIVERTING A LOT OF  
7 ATTENTION BECAUSE WE DEAL WITH BYLAW KINDS OF ISSUES INSTEAD  
8 OF THE INDEPENDENT OPERATION. HOW WILL-- HOW ARE WE GOING TO  
9 RECREATE THE INDEPENDENCE AND YET ADDRESS THE COMMUNITY  
10 CONCERNS? I MEAN, I-- IS IT, YOU KNOW, A SEPARATE GROUP OR  
11 WHATEVER IT MAY BE.

12

13 **DR. THOMAS GARTHWAITE:** AGAIN, SPEAKING ONLY FOR MYSELF HERE,  
14 I'M NOT IN ANY WAY TRYING TO REPRESENT THE ENTIRE-- THE  
15 HOSPITAL ADVISORY BOARD BUT FROM MY...

16

17 **SUP. KNABE:** WELL, THAT'S ANOTHER QUESTION. SOMEBODY FROM-- YOU  
18 KNOW, MAYBE SOMEBODY SHOULD HAVE BEEN HERE FROM THE HOSPITAL  
19 ADVISORY BOARD IN ADDITION TO YOURSELF AS WELL, TOO, SO...

20

21 **DR. THOMAS GARTHWAITE:** RIGHT. WE-- WE ATTEMPTED TO MAKE THAT  
22 HAPPEN. I'D PERSONALLY THINK THAT THERE REALLY ARE TWO  
23 FUNCTIONS AND IT WILL BE CHALLENGING TO GET A PANEL OF EXPERTS  
24 IN HEALTHCARE TO EVER FEEL THAT THEY CAN HELP THE OPERATIONAL  
25 SIDE OF THE HOSPITAL IF, IN FACT, A LARGE PORTION OF THE BOARD



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1 IS REALLY MORE OF COMMUNITY REPRESENTATIVES. I ABSOLUTELY  
2 BELIEVE THAT BOTH OF THOSE MUST OCCUR AND I THINK THERE SHOULD  
3 BE A MECHANISM. I PERSONALLY THINK THERE PROBABLY OUGHT TO BE  
4 TWO BODIES BUT THAT'S MY OWN PERSONAL OPINION. I'M SURE OTHERS  
5 WOULD DISAGREE.

6

7 **SUP. KNABE:** OKAY.

8

9 **SUP. MOLINA, CHAIR:** MS. BURKE.

10

11 **SUP. BURKE:** INITIALLY, THE ADVISORY BOARD WAS GOING TO BE AN  
12 INTERMEDIARY BETWEEN NAVIGANT AND DEPARTMENT AND I WONDER HOW-  
13 - HAS THAT REALLY HAPPENED AT ALL?

14

15 **DR. THOMAS GARTHWAITE:** WELL, I THINK PRIMARILY AN INTERMEDIARY  
16 BETWEEN I THINK NAVIGANT AND THE BOARD AND TO, YOU KNOW, TO  
17 INFORM THE DEPARTMENT AND TO, YOU KNOW, TO PROVIDE ADDITIONAL  
18 ADVICE...

19

20 **SUP. BURKE:** AND EVALUATE NAVIGANT, REALLY, I THINK WAS PART OF  
21 THE RESPONSIBILITY.

22

23 **DR. THOMAS GARTHWAITE:** I'M SORRY? TO...

24

25 **SUP. BURKE:** EVALUATE.





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1

2 **DR. THOMAS GARTHWAITE:** EVALUATE. YES, YES, I THINK THAT IS THE

3 CASE. I THINK, YOU KNOW, LIKE ANY NEW BODY THAT COMES INTO

4 BEING THAT IS CREATED OUT OF WHERE NO BODY EXISTED, THERE, YOU

5 KNOW, THERE IS SOME WORK TO BE DONE TO UNDERSTAND THE ROLE AND

6 THERE IS SOME LEARNING CURVE AS TO GET BETTER AT THAT. I DO

7 THINK THAT THE HOSPITAL ADVISORY BOARD HAS PROGRESSED. WE

8 SPENT A SIGNIFICANT AMOUNT OF TIME TALKING ABOUT JOINT

9 COMMISSION AND C.M.S. AT THE LAST ADVISORY BOARD MEETING AND

10 HAD A CLOSED SESSION WHERE WE RECEIVED THE QUALITY-- THE

11 REPORT FROM THE QUALITY COMMITTEE AND I THINK THAT ALL THOSE

12 WERE VERY SUBSTANTIVE, GOOD DISCUSSIONS THAT WERE-- THAT, I

13 THINK, WERE VERY HELPFUL. THAT IS WHERE WE SHOULD BE SPENDING

14 ALL THE TIME. THE MEMBERS OF THE HOSPITAL ADVISORY BOARD SERVE

15 ON THIS C.E.O. ADVISORY GROUP THAT MEETS WITH HANK WELLS EVERY

16 WEDNESDAY. THAT INCLUDES EVERYTHING FROM REVIEWING THE REPORTS

17 ON PROGRESS TO ACTUALLY WALKING AROUND THE HOSPITAL ON SAFETY

18 ROUNDS AND TALKING TO FRONTLINE STAFF TO GET A SENSE OF HOW

19 THE HOSPITAL IS PROGRESSING. SO WE'RE TAKING HEALTH

20 PROFESSIONALS FROM OTHER INSTITUTIONS AND THEY'RE MAKING

21 ROUNDS AT KING DREW, TALKING TO STAFF AND LOOKING AT THINGS

22 THAT ARE WORKING, NOT WORKING, FINDING OUT FIRSTHAND. I THINK

23 THOSE ARE VERY VALUABLE PIECES OF INFORMATION AND HAVE BEEN

24 VERY HELPFUL IN PRIORITIZING ACTIONS THAT FOLLOW DURING THE

25 NEXT WEEK OR TWO.



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1

2 **SUP. BURKE:** I HAVE SOME CONCERNS THAT ARE SIMILAR TO THE  
3 ISSUES YOU'VE RAISED. I UNDERSTAND THAT, AT MANY OF THE  
4 MEETINGS, THE EXPERTS ARE VERY LEERY OF MAKING COMMENT,  
5 THEY'RE VERY QUIET. ARE THE EXPERTS HAVING INPUT AT THE  
6 COMMITTEE LEVEL OR OUTSIDE OF THE HOSPITAL ADVISORY MEETING?  
7 HOW DO THEY GET THEIR INPUT?

8

9 **DR. THOMAS GARTHWAITE:** I THINK-- I FEEL THAT WE GET-- WE GET  
10 SOME INPUT, CERTAINLY, DURING THE H.A.B. MEETINGS THEMSELVES.  
11 THE C.E.O. MEETINGS ON WEDNESDAY HAVE ALSO BEEN VERY HELPFUL  
12 AND AT LEAST TWO OR THREE MEMBERS OF THE H.A.B. HAVE BEEN  
13 SHOWING UP AT THOSE ON A REGULAR ONGOING BASIS. I'VE ATTENDED  
14 VIRTUALLY ALL OF THOSE. THE SUBCOMMITTEES ALSO HAVE AN  
15 OPPORTUNITY, THE QUALITY COMMITTEE AND THE PLANNING AND  
16 FINANCE COMMITTEE BOTH HAVE THAT OPPORTUNITY AS WELL.

17

18 **SUP. BURKE:** IS THAT WHERE THE EXPERTS ARE MORE OPEN IN TERMS  
19 OF EXPRESSING THEIR VIEWS?

20

21 **DR. THOMAS GARTHWAITE:** I'VE NOT BEEN TO EITHER OF THE-- I  
22 HAVEN'T BEEN ABLE TO MAKE THE QUALITY MEETINGS OR THE PLANNING  
23 MEETINGS, SO I CAN'T TELL YOU FOR FIRSTHAND.

24

25 **SUP. BURKE:** ALL RIGHT. ONE OF THE ISSUES THAT...



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1

2 **DR. THOMAS GARTHWAITE:** I WOULD JUST SAY THAT, YOU KNOW,  
3 PROBABLY NO-- VERY FEW BETTER AUTHORITIES ANYWHERE IN THE  
4 WORLD THAN, MAYBE, DR. KAISER ON QUALITY AS THE HEAD OF THE  
5 NATIONAL QUALITY FORUM AND FORMER REGULATOR HERE IN CALIFORNIA  
6 AND HAS A VERY STRONG BACKGROUND AND HE CHAIRS THE QUALITY  
7 COMMITTEE, SO, YES, HE'S GET-- WE'RE GETTING HIS INPUT FOR  
8 SURE. I CAN SAY THAT WITHOUT DOUBT.

9

10 **SUP. BURKE:** SO WE'RE GETTING HIS INPUT, EVEN IF IT DOESN'T  
11 APPEAR AT THE REGULAR MEETING THAT THEY'RE GIVING THEIR INPUT,  
12 THAT THERE IS A MECHANISM FOR THEM TO GET THEIR INPUT. NOW, I  
13 HAVE MIXED FEELINGS ABOUT YOUR SUGGESTION THAT THERE NOT BE  
14 COMMUNITY MEMBERS. FOR ONE THING, I CAN UNDERSTAND THAT, IF  
15 YOU'RE TRYING TO MOVE AND ADDRESS TECHNICAL ISSUES AND  
16 OPERATIONAL ISSUES, YOU NEED PEOPLE WHO HAVE THAT EXPERIENCE.  
17 HOWEVER, I THOUGHT THERE WAS TO BE SOME PART OF THE  
18 RESPONSIBILITY WHICH WAS IDENTIFYING COMMUNITY NEED. NOW,  
19 EVERYONE THERE, WHO-- BECAUSE YOU'RE A COMMUNITY PERSON  
20 DOESN'T MEAN YOU'RE GOING TO BE ABLE TO DO THAT BUT, IF THE  
21 COMMUNITY MEMBERS WERE IDENTIFIED FROM, FOR INSTANCE, OTHER  
22 PROVIDERS AND YOU HAVE SOME PROVIDERS SUCH AS, IS IT ST. JOHN,  
23 THAT PROVIDES AND DIRECTS PEOPLE INTO THE HOSPITAL, YOU HAVE  
24 OTHER KINDS OF FACILITIES IN THE COMMUNITY THAT WOULD HAVE A  
25 REAL GOOD IDEA OF WHETHER OR NOT THE PEOPLE THEY SEND AND THE



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1 PEOPLE WHO UTILIZE THE HOSPITAL ARE GETTING THE KIND OF  
2 SERVICES THAT THEY NEED SO THAT, IF THE PROPER COMMUNITY  
3 PEOPLE ARE APPOINTED OR IDENTIFIED, IT SEEMS TO ME THAT YOU  
4 WOULD GET THE SAME THING. YOU WOULD BE ABLE TO DETERMINE WHAT  
5 THE COMMUNITY NEEDS ARE. BUT HOW DO YOU-- IF YOU DON'T HAVE  
6 COMMUNITY PARTICIPATION, WHAT IS THE MECHANISM TO GET AND  
7 IDENTIFY COMMUNITY NEEDS? IS THERE A SURVEY THAT YOU'RE DOING  
8 OR HOW DO YOU DO THAT?

9

10 **DR. THOMAS GARTHWAITE:** YEAH, I WANT TO BE VERY CLEAR THAT I  
11 THINK IT'S ABSOLUTELY CRITICAL TO GET COMMUNITY INPUT. AND I  
12 THINK THERE ARE A COUPLE WAYS YOU CAN DO THAT. ONE IS IF YOU  
13 CAN FIND EXPERTS IN THE AREAS THAT ARE NEEDED, HOSPITAL  
14 MANAGEMENT, YOU KNOW, HEALTHCARE EXPERTS WHO ARE OPERATIONALLY  
15 COMPETENT AND HAVE EXPERTISE FROM THE COMMUNITY, BY ALL MEANS,  
16 I SEE NOTHING WRONG AND, IN FACT, WOULD AIM TO BRING THEM ON  
17 TO THE BOARD. I THINK THE CHALLENGE, THOUGH, IS THAT, WHEN  
18 ONE-- WHAT HAS TYPICALLY HAPPENED IS THAT, RATHER THAN MEMBERS  
19 OF THE COMMUNITY WITH EXPERTISE, YOU GET MEMBERS OF THE  
20 COMMUNITY WHO ARE REALLY IN ADVOCACY POSITIONS WHO LOOK-- WHO  
21 LOOK FOR MAYBE WHAT-- WHATEVER THEIR BASE IS TO ADVOCATE FOR  
22 THAT. AND THAT MAY BE WELL AND GOOD AND I PROBABLY AGREE WITH  
23 MANY OF THEM BUT, WHEN IT COMES TO MAKING THE HARD DECISIONS  
24 THAT YOU NEED TO MAKE TO RUN THE HOSPITAL EFFECTIVELY,  
25 EFFICIENTLY, PASS JOINT COMMISSION, ALL THOSE OTHER PIECES,



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1   SOMETIMES THOSE ARE IN CONFLICT AND I THINK THAT LEADS TO THE  
2   CHALLENGES THAT I THINK TRUTHFULLY WAS THE PROBLEM WITH DREW  
3   UNIVERSITY'S BOARD OF TRUSTEES FOR MANY, MANY YEARS AND I  
4   THINK THAT IT'S A DANGER THAT THE H.A.B. COULD EVOLVE MORE TO  
5   THAT MODEL THAN THE MODEL OF EXPERTS. TO ME, THERE ARE TWO  
6   THINGS. ONE, YOU HAVE TO GET COMMUNITY INPUT AND ALIGN THE  
7   INSTITUTION TO PROVIDE NEEDED SERVICES TO THE COMMUNITY  
8   ABSOLUTE THE MISSION OF THE HOSPITAL. THE SECOND IS YOU HAVE  
9   TO RUN IT SO WELL THAT IT'S TRULY A GIFT, THAT THE QUALITY AND  
10   THE EFFICIENCY OF THOSE SERVICES IS A GIFT OF THAT COMMUNITY,  
11   MEETS THE NEED, IS DONE WELL. AND I THINK THAT, YOU KNOW, WHAT  
12   I'VE SEEN IS, IF YOU TRY TO MIX ALL THAT TOGETHER, IT DOESN'T  
13   ALWAYS WORK AND SOMETIMES WORKS POORLY.

14

15   **SUP. BURKE:** MADAM CHAIR?

16

17   **SUP. MOLINA, CHAIR:** YES.

18

19   **SUP. BURKE:** I DO THINK THAT WE NEED SOME OPPORTUNITY TO REVIEW  
20   THE FUNCTION AND RESPONSIBILITIES OF THE H.A.B. I DON'T KNOW  
21   WHAT-- THE BYLAWS, AT THIS POINT, NEED TO MOVE FORWARD BECAUSE  
22   THEY NEED TO OPERATE BUT I DON'T KNOW EXACTLY HOW WE SHOULD DO  
23   THAT IN VIEW OF THE FACT THAT IT WAS TIED TO NAVIGANT AND THE  
24   CONTRACT WITH NAVIGANT PERHAPS AT THE TIME THAT WE SEE WHAT IS  
25   THE SUCCESSOR TO NAVIGANT OR HOW WE MOVE FORWARD AT THE END OF



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1 THE NAVIGANT CONTRACT, IT WOULD BE APPROPRIATE FOR US TO ALSO  
2 REVIEW THE ADVISORY AND DETERMINE WHETHER OR NOT IT FITS IN  
3 WITH THAT NEW STRUCTURE. SO, I DON'T KNOW, MAYBE I'LL BRING IN  
4 A NEW MOTION LATER RATHER THAN GETTING IT ALL CONFUSED WITH  
5 THIS BUT I DO THINK THAT THAT'S SOMETHING THAT HAS TO HAPPEN.

6

7 **DR. THOMAS GARTHWAITE:** CAN I JUST ADD MAYBE TWO POINTS. ONE IS  
8 THAT I THINK THE HOSPITAL ADVISORY BOARD WOULD WELCOME A CLEAR  
9 DEFINITION OF WHAT'S EXPECTED AND HOW THEY FIT IN AND I THINK  
10 THERE'S THAT CONCERN AS EXPRESSED, AT LEAST TO SOME DEGREE, ON  
11 THE BOARD. AND, SECONDLY, THAT SUPERVISOR MOLINA HAD SENT ME A  
12 LETTER AND ASKED FOR SOME CLARIFICATION THAT WE ARE WORKING ON  
13 A RESPONSE, IT'S DUE OCTOBER 3RD, AND WE ARE TRYING TO  
14 INCORPORATE SOME OF THAT IN THERE.

15

16 **SUP. KNABE:** ALSO, BACK IN FEBRUARY, THIS BOARD WAS SUPPOSED TO  
17 RECEIVE A REPORT FROM NAVIGANT AS IT RELATED TO ADDRESSING HOW  
18 THE ADVISORY BOARD WOULD BE ACCOUNTABLE.

19

20 **SUP. MOLINA, CHAIR:** IT DID. THE FEBRUARY REPORT...

21

22 **SUP. KNABE:** HAS NAVIGANT EVER RESPONDED TO THAT?

23

24 **SUP. MOLINA, CHAIR:** IN FEBRUARY, THEY DID REPORT.

25



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1    **SUP. KNABE:** HUH?

2

3    **SUP. MOLINA, CHAIR:** ARE YOU TALKING ABOUT THE FEBRUARY REPORT?

4

5    **SUP. KNABE:** THE ONE THAT WE ASKED FOR THE REPORT BACK IN  
6    FEBRUARY, WHETHER WE EVER GOT A RESPONSE TO THAT.

7

8    **SUP. MOLINA, CHAIR:** I THINK WE DID.

9

10    **SUP. KNABE:** I DON'T THINK WE DID.

11

12    **DR. THOMAS GARTHWAITE:** I'D HAVE TO REVIEW IT.

13

14    **SUP. BURKE:** WE CAN SEE YOUR LETTER AND WHAT YOU'VE REQUESTED  
15    ON OCTOBER 3RD, THEN WE CAN SEE WHETHER OR NOT ALL OF THOSE  
16    ISSUES I'M TRYING...

17

18    **SUP. MOLINA, CHAIR:** WHAT LETTER? YOU MEAN THE ONE I SENT TO  
19    DR. GARTHWAITE?

20

21    **SUP. BURKE:** YES.

22

23    **SUP. MOLINA, CHAIR:** OH, YOU'RE CERTAINLY WELCOME TO IT,  
24    ABSOLUTELY.

25





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1   **SUP. BURKE:** BUT DOES THAT COVER THE ISSUE IN TERMS OF  
2   REVIEWING THE ADVISORY AS IT GOES FORWARD IN TERMS OF ITS  
3   RESPONSIBILITIES?

4

5   **SUP. MOLINA, CHAIR:** I DON'T KNOW THAT IT DOES. LET ME PULL IT  
6   OUT AGAIN. LET ME CHECK.

7

8   **SUP. BURKE:** WELL...

9

10   **DR. THOMAS GARTHWAITE:** I THINK...

11

12   **SUP. MOLINA, CHAIR:** SUPERVISOR YAROSLAVSKY?

13

14   **DR. THOMAS GARTHWAITE:** I BELIEVE SO. I BELIEVE SO AND I THINK  
15   ALL BOARD MEMBERS WERE COPIED ON THE LETTER, IF I'M NOT  
16   MISTAKEN.

17

18   **SUP. MOLINA, CHAIR:** I THOUGHT SO. SUPERVISOR YAROSLAVSKY?

19

20   **SUP. YAROSLAVSKY:** WERE YOU CONSULTED ON THE BYLAWS BY THE  
21   H.A.B.? THE BYLAWS THAT THEY SUBMITTED TO US A COUPLE WEEKS  
22   AGO?

23

24   **DR. THOMAS GARTHWAITE:** RIGHT, YEAH, I WAS PRESENT AT THE  
25   MEETING. I GOT THEM IN ADVANCE LIKE THE REST OF THE MEMBERS.



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1

2 **SUP. YAROSLAVSKY:** THAT'S RIGHT. YOU'RE ON THE H.A.B. WHO  
3 DRAFTED THE RECOMMENDATIONS THAT WERE MADE TO US?

4

5 **DR. THOMAS GARTHWAITE:** I'M NOT SURE. I KNOW THEY'RE DONE, I  
6 THINK, WITH-- DO YOU KNOW? I THINK ANITA LEE FROM OUR COUNTY  
7 COUNSEL HAS WORKED WITH THE H.A.B. TO DRAFT THE BYLAWS AND...

8

9 **SUP. YAROSLAVSKY:** AND WHO AT THE H.A.B. WOULD SHE HAVE BEEN  
10 WORKING WITH? SHE BEEN WORKING WITH THE CHAIR OR WITH THE  
11 COMMITTEE OF THE H.A.B.?

12

13 **DR. THOMAS GARTHWAITE:** SHE'S HERE. SO PRIMARILY, HECTOR FLORES  
14 AND HANK WELLS.

15

16 **SUP. YAROSLAVSKY:** I'D LIKE TO GET MORE OF YOUR COMMENTS ON  
17 THIS. I'VE HEARD WHAT YOU'VE SAID HERE TODAY. I HAVE SIMILAR  
18 CONCERNS. I HAVE SOME CONCERNS ABOUT SPECIFIC PROVISIONS IN  
19 HERE WHICH I WOULD NOT SUPPORT. I DON'T THINK IT'S NECESSARY  
20 THAT WE MOVE FORWARD TODAY. I THINK THAT THE H.A.B. HAS BEEN  
21 OPERATING UNDER WHATEVER AUTHORITY THEY HAVE FOR SOME TIME AND  
22 I THINK THAT NOW IS THE TIME, IN THE CONTEXT OF THE BYLAWS, IS  
23 THE TIME TO CLARIFY A LOT OF THINGS BECAUSE, IF YOU DON'T  
24 CLARIFY THEM IN THE BYLAWS, THEN ANYTHING THAT IS CLARIFIED  
25 SUBSEQUENTLY WILL BE POTENTIALLY IN CONFLICT WITH THE BYLAWS.



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1 AND I'VE SEEN THE WAY THIS IS EVOLVING, I DON'T LIKE THE WAY  
2 IT'S EVOLVING, AND IT'S NOT SPEAKING FOR ME, AND I THINK THERE  
3 ARE OTHERS WHO FEEL THIS WAY ON THE BOARD. THIS IS NOT  
4 EVOLVING IN THE WAY THAT WE HAD ENVISIONED, WHICH WAS  
5 ENVISIONED FOR THE H.A.B. FOR KING DREW HOSPITAL. THIS WAS  
6 NEVER INTENDED TO BE A HEALTH AUTHORITY. IT WAS INTENDED TO BE  
7 A SET OF EYES AND EARS OF EXPERTS WHO WOULD ADVISE US AND  
8 YOU...

9

10 **SUP. ANTONOVICH:** PROFESSIONALS.

11

12 **SUP. YAROSLAVSKY:** ...ON-- AS YOU WENT ABOUT TRYING TO REPAIR  
13 THE SITUATION AT THE HOSPITAL. THE GOVERNANCE ISSUES ARE MUCH  
14 MORE COMPLEX, MUCH BROADER AND HOPEFULLY WOULD BE SYSTEM WIDE.  
15 THAT'S NOT THE WAY THIS IS TURNING OUT TO BE AND, AS I SAID  
16 ONCE BEFORE, THIS IS-- I'M FINDING MYSELF SPENDING FAR TOO  
17 MUCH TIME, I DON'T KNOW HOW YOU ARE DOING, BUT I FIND MYSELF  
18 SPENDING FAR MORE TIME THAN I WOULD LIKE ON THIS KIND OF STUFF  
19 THAN ON THE SOLUTION. I'M NOT IN THE LOOP ON THE SOLUTION, YOU  
20 ARE AND I CAN ONLY IMAGINE THAT IT'S FRUSTRATING. ANYWAY, I  
21 WOULD LIKE TO-- COULD YOU, IN A-- BY NEXT TUESDAY, PROVIDE US  
22 WITH-- I DON'T WANT TO MAKE THIS A BIG PROJECT BUT YOUR  
23 SUCCINCT COMMENTS IN ONE OR TWO PAGES MAXIMUM ON THE THINGS  
24 THAT YOU WOULD WANT TO SEE MODIFIED OR THINGS THAT TROUBLE YOU  
25 AND PROPOSE ALTERNATIVES TO THEM FOR OUR CONSIDERATION? COULD



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1 YOU DO THAT BY THE END OF THE WEEK OR BY 9:00 MONDAY MORNING  
2 SO THAT WE HAVE 24 HOURS, YOU KNOW, WE CAN TAKE A LOOK AT  
3 THEM?

4

5 **DR. THOMAS GARTHWAITE:** SURE.

6

7 **SUP. YAROSLAVSKY:** I HAVE MY OWN, YOU KNOW, SHORT LIST BUT I'M  
8 NOT IN YOUR SHOES AND I'D LIKE TO KNOW WHERE YOU ARE ON THAT.  
9 SO I WOULD MOVE THAT WE PUT THIS OVER ONE WEEK, THAT DR.  
10 GARTHWAITE WILL PRESENT US OR CIRCULATE A NO MORE THAN TWO-  
11 PAGE COMMENT MEMORANDUM, IT DOESN'T HAVE TO BE TWO PAGES, BY  
12 MONDAY MORNING AND THEN WE CAN MOVE ACCORDINGLY. THAT'S MY  
13 MOTION.

14

15 **SUP. MOLINA, CHAIR:** VERY GOOD. ALL RIGHT. SUPERVISOR-- I MEAN,  
16 DR. GARTHWAITE, LET ME UNDERSTAND, BECAUSE I'M SORT OF VERY  
17 UNCLEAR AS TO WHERE YOU'RE GOING OR WHAT IS GOING ON HERE.  
18 PRESENTLY, YOU DON'T SUPPORT THIS BYLAW CHANGE, IS THAT WHAT  
19 YOU'RE SAYING?

20

21 **DR. THOMAS GARTHWAITE:** NO. I THINK THAT-- YOU KNOW, I DID NOT--  
22 - I BASICALLY VOTED FOR THE BYLAWS OVERALL. THE QUESTION WAS  
23 ASKED SPECIFICALLY WITH THE C.E.O. PROVISION AND I SAID THAT  
24 THAT WAS NOT, IN GENERAL, THE WAY IT WAS DONE. I THINK THE  
25 REASON THAT I DIDN'T MAKE A CASE OF THAT AT THE H.A.B. WAS



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1 THAT I FELT THAT WAS ANOTHER EXPERT IN WHAT WAS BECOMING  
2 INCREASINGLY MORE OF A STAKEHOLDER COMMITTEE AND MIGHT  
3 FUNCTION BETTER WITH THAT VOTE IN THE EXPERT CAMP. BUT...

4

5 **SUP. MOLINA, CHAIR:** BUT THIS BYLAW CHANGE TALKS FOR MORE  
6 COMMUNITY REPRESENTATION AND YOU JUST SAID THAT YOU DON'T  
7 SUPPORT THAT. SO WHY WOULD YOU SUPPORT THIS BYLAW CHANGE IF  
8 YOU DON'T SUPPORT THAT NOTION?

9

10 **DR. THOMAS GARTHWAITE:** MY FEELING WAS THAT I NEEDED-- I NEED  
11 TO EACH-- LOOK AT EACH-- I'M NOT AGAINST COMMUNITY MEMBERS AS  
12 LONG AS THEY HAVE EXPERTISE AND THAT I WOULD REVIEW EACH  
13 COMMUNITY-- THE REASON I VOTED "NO" ON THE PERSON THAT WAS PUT  
14 FORWARD, BECAUSE I DID NOT HAVE A CHANCE TO VERIFY THAT THEIR  
15 CREDENTIALS HAD-- THAT THEY HAD HEALTHCARE EXPERTISE THAT  
16 WOULD BE IMPORTANT TO THE FUTURE OF THE HOSPITAL.

17

18 **SUP. MOLINA, CHAIR:** I KNOW, BUT I'M ASKING YOU A VERY  
19 DIFFERENT QUESTION. WHAT WE HAVE BEFORE US IS THE BYLAW  
20 CHANGES.

21

22 **DR. THOMAS GARTHWAITE:** UNDERSTOOD.

23



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1   **SUP. MOLINA, CHAIR:** ALL RIGHT. THE BYLAW CHANGES TALK ABOUT  
2   EXPANSION AND ADDING MORE COMMUNITY REPRESENTATIVES. ARE YOU  
3   OPPOSED TO THAT BYLAW CHANGE?

4

5   **DR. THOMAS GARTHWAITE:** I'M-- HEH. BUT MY ANSWER IS STILL I'M  
6   NOT OPPOSED TO IT BUT THE COMMUNITY REPRESENT-- BECAUSE I  
7   THINK IT'S IMPORTANT THAT THE-- SOME OF THE EXPERTS ARE FROM  
8   THE COMMUNITY THAT LIVE AND WORK IN THE AREA SERVED BY KING  
9   DREW MEDICAL CENTER BUT THEY NEED TO BE EXPERTS.

10

11   **SUP. MOLINA, CHAIR:** AS IS-- BUT, AS IS, DO YOU SUPPORT IT? I  
12   MEAN, IT'S PRESENTED TO US. NOT A HARD QUESTION, DR.  
13   GARTHWAITE.

14

15   **DR. THOMAS GARTHWAITE:** WELL, HEH...

16

17   **SUP. MOLINA, CHAIR:** DO YOU WANT IT BETTER DEFINED? IS IT NOT  
18   COMPLETE? IT'S NOT THOROUGH?

19

20   **DR. THOMAS GARTHWAITE:** I MEAN, IT WOULD BE-- YEAH. I THINK  
21   THAT I SUPPORT THE COMMUNITY MEMBERS, BUT I DO BELIEVE THEY  
22   NEED TO BE EXPERTS. SO IF MODIFYING THE BYLAWS TO SAY THAT THE  
23   HOSPITAL ADVISORY BOARD SHOULD SEEK EXPERTS IN HEALTHCARE,  
24   SOME OF WHOM COME FROM THE COMMUNITY SERVICE BY KING DREW  
25   MEDICAL CENTER, I THINK THAT WOULD BE A BETTER WORDING.



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1

2 **SUP. MOLINA, CHAIR:** DR. GARTHWAITE, I'M GETTING SO MANY MIXED

3 MESSAGES. I'M TRYING TO UNDERSTAND IT, ALL RIGHT? FIRST OF

4 ALL, WE WERE PRESENTED WITH THIS ADVISORY AS THAT THIS WAS

5 GOING TO BE THE MECHANISM BY WHICH THERE WOULD BE SOME

6 HOPEFULLY NOT ONLY NAVIGANT, BUT THE MANAGEMENT TEAM WHICH WAS

7 NOT TO BE JUST EXCLUSIVELY NAVIGANT, IT WAS SUPPOSED TO BE A

8 MANAGEMENT TEAM AT KING, WAS GOING TO HAVE AN OPPORTUNITY TO

9 RECEIVE RECOMMENDATIONS AND IDEAS AND SUPPORT AND MAYBE

10 INSIGHT AS TO HOW TO CREATE A TIGHTER MANAGEMENT SYSTEM AT

11 M.L.K. THE IDEA WAS THAT THIS GROUP WOULD GET BRIEFINGS FROM

12 TIME TO TIME, I TAKE IT, AND GET INFORMATION AND SORT OUT

13 ISSUES, ISSUES AS WAS RAISED EARLIER ON THE ANESTHESIOLOGY

14 CONTRACT. I MEAN, HERE WE HAVE A PROBLEM, WE CAN'T SEEM TO

15 ATTRACT THE KIND-- IT'S NOT ANESTHESIOLOGY, IT'S RADIOLOGY. I

16 APOLOGIZE. ATTRACT RADIOLOGISTS AND SO ON THAT MAYBE THEY

17 WOULD PROVIDE INPUT. BUT I'M GETTING THE IMPRESSION, CERTAINLY

18 THE IMPRESSION FROM MY COLLEAGUES HERE ON THE BOARD, THERE

19 DOESN'T SEEM TO BE SUPPORT OF THIS ADVISORY UNLESS THEY ARE

20 ONLY GOING TO HEED YOUR ADVICE, ONE, AND SECOND OF ALL-- WELL,

21 THAT'S THE IMPRESSION I'M GETTING. I MEAN, NOW, I UNDERSTAND

22 THAT THERE'S ALWAYS-- I'VE BEEN A MINORITY VOTER ON HERE FROM

23 TIME TO TIME AND I'D LOVE TO EXPLAIN TO PEOPLE HOW AND WHY,

24 YOU KNOW, WAS THE REASON I LOST AND SO ON, MOST PEOPLE ON THIS

25 BOARD AREN'T INTERESTING IN HEARING ABOUT IT. BUT THE POINT IS





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1 THAT, IN THIS INSTANCE, I'M TRYING TO UNDERSTAND. NOW, THESE  
2 FOLKS, AS I UNDERSTAND OR, I MEAN, MAYBE WITH THE EXCEPTION OF  
3 KATHY OCHOA, FOR THE MOST PART, ARE EXPERTS IN THEIR AREAS AND  
4 THEY ARE TAKING AN AWFUL LOT OF TIME TO DEDICATE TO THIS AND  
5 HOPEFULLY CREATE A MECHANISM THAT IS GOING TO CREATE THAT KIND  
6 OF RELIABILITY SO THAT WE CAN FORM A BETTER MANAGEMENT TEAM AT  
7 MARTIN LUTHER KING. BUT I DON'T SEEM TO GET A SENSE FROM YOU  
8 THAT THAT IS WHERE THIS IS GOING. IT IS ONE THING FOR THIS  
9 BOARD TO DISAGREE WITH RECOMMENDATIONS THAT IT'S PRESENTED,  
10 THAT HAPPENS PRETTY REGULARLY WITH DEPARTMENT HEADS MAKING  
11 RECOMMENDATIONS TO US, BUT I'M CONCERNED ABOUT WHETHER, IN  
12 FACT, YOU RESPECT THE RECOMMENDATIONS OR THINK THAT THE  
13 RECOMMENDATIONS OR THE WORK THAT THEY'RE GOING TO BE DOING IS  
14 GOING TO HAVE THE KIND OF INTEGRITY AND RESPECT THAT YOU'RE  
15 GOING TO BE ABLE TO BRING TO US AND SPEAK CLEARLY AND  
16 EFFECTIVELY ABOUT AND NOT PLAY AROUND THE EDGES OF, "YEAH, I  
17 WOULD SUPPORT IT IF IT HAD A LITTLE BIT MORE." I WANT TO  
18 UNDERSTAND THAT BECAUSE, OTHERWISE, WE'RE WASTING THEIR TIME,  
19 WE REALLY ARE AND WHY GO THROUGH THAT-- THAT KIND OF MECHANISM  
20 IF THERE ISN'T THE KIND OF STRAIGHTFORWARD, EFFECTIVE HONESTY  
21 TO SAY WE'VE GOT TO WRESTLE WITH THESE ISSUES. AND, EVEN AT  
22 THE END OF THE DAY, I MEAN, IT'S NICE WHEN, YOU KNOW, YOU CAN  
23 GET IN A PROCESS THAT, YOU KNOW, YEAH, I MAY BE ONE MEMBER OF  
24 THIS ADVISORY BUT, YOU KNOW, I CAN-- I'LL GO TO THE BOARD AND  
25 WE'LL CHANGE THESE RECOMMENDATIONS. I'M HOPING YOU'RE GOING TO



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1 WORK MORE IN CONCERT WITH THIS BOARD AND THAT'S WHAT I'M  
2 TRYING TO GET A BETTER UNDERSTANDING OF. COULD YOU SHARE WITH  
3 ME HOW YOU'RE WORKING WITH THEM?

4

5 **DR. THOMAS GARTHWAITE:** WELL, I WOULD LIKE TO THINK THAT WE ARE  
6 WORKING IN CONCERT. I MEAN, I DO ATTEND ALL THEIR MEETINGS, I  
7 ATTEND THEIR CONFERENCE CALLS. I ATTEND THE WEDNESDAY  
8 MEETINGS.

9

10 **SUP. MOLINA, CHAIR:** DID THEY DISAGREE WITH YOU ON THIS BYLAW  
11 CHANGE? IS THAT WHAT HAPPENED?

12

13 **DR. THOMAS GARTHWAITE:** NO, THERE'S-- NO. AND I FELT THAT I  
14 COULD SUPPORT THE BYLAWS BUT THAT, EACH TIME THEY BROUGHT UP A  
15 NEW MEMBER, THAT I WOULD ASK THE QUESTION, IS THERE REALLY  
16 EXPERTISE OR-- IS THIS ADVOCACY OR EXPERTISE? AND MY-- AND I  
17 WOULD COME...

18

19 **SUP. MOLINA, CHAIR:** SO THAT'S THE ONLY DIFFERENCE?

20

21 **DR. THOMAS GARTHWAITE:** RIGHT. THAT'S MY DIFFERENCE. AND I  
22 WOULD THEN ARGUE FOR EXPERTISE. THEY BROUGHT UP AN INDIVIDUAL  
23 FROM THE NOMINATING COMMITTEE WITH NO CREDENTIALS. I HADN'T  
24 SEEN THE CREDENTIALS OF THE INDIVIDUAL AND I FRANKLY COULDN'T  
25 VOTE FOR THAT INDIVIDUAL. I MADE THE POINT THAT I THOUGHT,



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1 UNTIL WE HAD THEIR CREDENTIALS, THAT WE SHOULDN'T BE ASKED TO  
2 VOTE ON SOMEONE UNTIL WE WERE ABLE TO SEE THE RESUME AND HAVE  
3 ADEQUATE TIME TO CALL THE PEOPLE WE KNOW IN HEALTHCARE TO FIND  
4 OUT IF INDEED THIS WAS A PERSON WITH EXPERTISE. THAT'S MY  
5 POINT AND...

6

7 **SUP. MOLINA, CHAIR:** AND THE REST OF THE BOARD MEMBERS FELT  
8 THAT IT WAS MORE IMPORTANT TO MOVE FORWARD WITHOUT ANSWERING  
9 YOUR QUESTIONS, IS THAT WHAT HAPPENED?

10

11 **DR. THOMAS GARTHWAITE:** YES, FOR THAT APPOINTMENT, RIGHT. I  
12 HAVE NOTHING FOR-- PRO OR CON FOR THE INDIVIDUAL. I STILL  
13 DON'T HAVE ENOUGH DATA TO MAKE THAT DECISION.

14

15 **SUP. MOLINA, CHAIR:** WELL, THAT'S UNFORTUNATE, BECAUSE I DO  
16 THINK THERE HAS TO BE SOME WAY THAT WE'RE GOING TO HAVE THIS  
17 COOPERATIVE WORKING RELATIONSHIP. OTHERWISE, WE'RE WASTING  
18 EACH OTHER'S TIME. AT ONE POINT, I HAD ASKED THAT THEY REALLY  
19 LOOK AT WHAT KIND OF A FINANCE MECHANISM THEY NEED IN ORDER TO  
20 SUSTAIN THEIR ORGANIZATION BECAUSE, EVENTUALLY, THEY'RE GOING  
21 TO HAVE TO BRING ON PEOPLE THAT ARE GOING TO HELP THEM BECOME  
22 MORE EFFECTIVE AS ADVISORY BOARD MEMBERS. BUT IF, IN FACT,  
23 WE'RE NOT GOING TO BE ABLE TO DEVELOP THE KIND OF WORKING  
24 RELATIONSHIP-- I HOPE IT ISN'T THE WORKING RELATIONSHIP THAT  
25 IS GOING TO BE "ONLY IF YOU AGREE WITH ME." I HOPE THAT'S NOT



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1 GOING TO BE THE CASE BUT IT'S GOING TO BE THE KIND OF WORKING  
2 RELATIONSHIP THAT THERE IS A DIALOGUE THAT GOES ON SO THAT AT  
3 LEAST PEOPLE ARE COMING WITH FOUNDED CONCLUSIONS. IT MAY BE  
4 ONE THING TO SAY, "AFTER I REVIEW THE CREDENTIALS, I PROBABLY  
5 COULD SUPPORT WHOEVER IT IS BUT IF I DON'T HAVE THEM," I THINK  
6 THAT'S LEGITIMATE AND I THINK MAYBE THAT THAT'S THE WHOLE  
7 ISSUE OF THESE BYLAWS, IS HOPEFULLY TO SET A SET OF GROUND  
8 RULES AS TO HOW THINGS OPERATE AND FUNCTION. WE NEED TO TRUST  
9 THAT THEY'RE WORKING EFFECTIVELY, RIGHT?

10

11 **DR. THOMAS GARTHWAITE:** YES.

12

13 **SUP. MOLINA, CHAIR:** AND I KNOW YOU DO AS WELL, WHETHER YOU'RE  
14 A MEMBER OF THE HEAD OF THE DEPARTMENT. BUT I THINK IT IS-- IT  
15 IS IMPORTANT, IT IS IMPORTANT THAT WE BECOME STRAIGHTFORWARD  
16 ABOUT WHAT WE EXPECT. MS. BURKE JUST MENTIONED THAT MAYBE WE  
17 DON'T HAVE A CLEAR LINE OF AUTHORITY AS TO HOW THEY RESPOND,  
18 MAYBE THAT THE ISSUE WAS THAT THEY WERE ONLY TO INTERFACE WITH  
19 NAVIGANT. I DON'T REMEMBER IT THAT WAY. I REMEMBER THAT  
20 NAVIGANT HAD SAID THIS WAS ONE OF THE RECOMMENDATIONS THAT  
21 THEY MADE THAT WE SHOULD PUT IN PLACE FOR THE LONG HAUL, NOT  
22 JUST FOR ONE TIME BUT FOR THE LONG HAUL, AND THAT, AS QUICKLY  
23 AS THESE PEOPLE COME ON, THAT THEIR EXPERTISE OR THEIR  
24 COLLECTIVE EXPERTISE WOULD ASSIST THEM IN THE FUTURE  
25 MANAGEMENT OF THE ORGANIZATION. BUT SOMEHOW IT SEEMS LIKE THAT



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1 MAY NOT BE CLEAR AND MAYBE WE NEED TO CLARIFY IT. NOW, WE'RE  
2 ASKING THAT THESE BYLAWS COME BACK IN A WEEK. I REALLY THINK  
3 THAT, DR. GARTHWAITE, YOU NEED TO WRESTLE WITH THIS AND BRING  
4 TOGETHER BACK A COMPREHENSIVE REPORT ABOUT THAT RELATIONSHIP.  
5 I WANT TO KNOW WHAT MY DUTY IS TO THIS ADVISORY BOARD AND WHAT  
6 THEIR DUTY IS TO ME. IT DOESN'T HAVE TO BE ONE THAT I HAVE TO  
7 BE IN AGREEMENT WITH YOU AND IT DOESN'T HAVE TO BE ONE THAT  
8 YOU HAVE TO BE IN AGREEMENT WITH DR. GARTHWAITE OR THE  
9 DEPARTMENT BUT I THINK IT'S VERY CLEAR THAT WE HAVE TO HAVE AN  
10 UNDERSTANDING OF HOW THEY ARE TO FUNCTION AND WHAT ROLES AND  
11 RESPONSIBILITIES THEY ARE TO HAVE. WE KNOW THEY DON'T HAVE THE  
12 AUTHORITY TO HIRE OR FIRE, THEY DO NOT HAVE THE AUTHORITY TO  
13 BUDGET OR SPEND WITHIN THE CONSTRAINTS OF THE HOSPITAL, BUT--  
14 BUT WE ALSO NEED TO UNDERSTAND IS THAT HOW ARE THEY-- WHAT  
15 KIND OF AGENDA ITEMS ARE THEY SUPPOSED TO RESPOND TO? HOW ARE  
16 THEY SUPPOSED TO MOVE FORWARD? AND HOW ARE WE GOING TO RESPECT  
17 THE RECOMMENDATIONS THAT THEY MAKE? I'M NOT SO SURE THAT WE'RE  
18 CLEAR ABOUT THAT AND I'M GETTING THE IMPRESSION, FROM WHAT YOU  
19 SAID EARLIER, THAT YOU'RE NOT VERY SUPPORTIVE OF THE WHOLE,  
20 EITHER, AND THAT MAKES ME WORRY. I HOPE IT ISN'T JUST BECAUSE  
21 THEY'RE NOT GOING TO AGREE WITH YOU. IF YOU HAVE CONCERNS AS  
22 TO WHETHER, IN FACT, THEY'RE GOING TO SERVE A ROLE THAT IS  
23 CRITICAL TO-- AS AN ADVISORY, THAT IS, BRINGING ON EXPERTS TO  
24 HELP US MANAGE THIS SYSTEM, THERE'S NO USE CALLING ON MORE  
25 EXPERTS TO COME AND SIT FOR TWO, THREE, SIX, EIGHT AND 10



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1 HOURS A WEEK IF, IN FACT, WE'RE NOT GOING TO VALUE THEIR  
2 ADVICE OR THEIR ASSISTANCE. IS IT POSSIBLE THAT YOU COULD HAVE  
3 A REPORT FOR US BY NEXT WEEK, A COMPREHENSIVE? OR DO YOU WANT  
4 TO CONTINUE THAT FURTHER? KEEP IN MIND, THE LONGER WE PUT THIS  
5 OUT, THEN IT'S GOING TO TAKE LONGER TO ORGANIZE AND GET THEM  
6 TO START WORKING MORE EFFECTIVELY.

7

8 **DR. THOMAS GARTHWAITE:** WELL, I THINK IF, IF YOU MEAN, BY  
9 COMPREHENSIVE, THAT WE WOULD HAVE...

10

11 **SUP. MOLINA, CHAIR:** I MEAN COMPREHENSIVE.

12

13 **DR. THOMAS GARTHWAITE:** RIGHT. WITH A DIALOGUE, I MEAN, TO DO  
14 THAT RIGHT I THINK WOULD REQUIRE A DIALOGUE WITH THE BOARD  
15 AND/OR AT LEAST THE LEADERSHIP OF THAT BOARD AND A REVIEW OF  
16 THE VARIOUS DOCUMENTS THAT LED US THIS FAR, I THINK THAT-- I  
17 THINK IT'S GOING TO BE HARD FOR ME TO DO THAT BY NEXT TUESDAY.

18

19 **SUP. MOLINA, CHAIR:** WHEN WOULD YOU LIKE TO DO IT?

20

21 **DR. THOMAS GARTHWAITE:** I THINK WE CAN DO IT BY CERTAINLY,  
22 LET'S SEE, BY THE FOLLOWING WEEK, WHERE WE ARE WORKING ON  
23 RESPONSE TO YOUR LETTER, WHICH INCLUDES A LOT OF THAT, WHICH  
24 WOULD-- SO THAT WE'RE, I THINK, ON TARGET FOR YOUR OCTOBER 3RD  
25 CUTOFF, SO I THINK...



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1

**SUP. MOLINA, CHAIR:** YEAH. WE HAD SCHEDULED OCTOBER 3RD AS OUR MEETING BUT, UNFORTUNATELY, THAT'S ROSH HASHANAH AND WE'RE NOT GOING TO BE MEETING THAT DAY, SO IT'S GOING TO HAVE TO BE POSTPONED FOR ANOTHER WEEK, SO YOU GET A WHOLE 'NOTHER WEEK TO FINISH THAT REPORT. SO THEN COULD YOU DO SO? I MEAN, I DON'T KNOW HOW YOU WANT TO PROCEED BUT MY INTEREST, AND I THINK MS. BURKE IS SORT OF IN THE SAME PLACE, WE NEED TO UNDERSTAND, WHAT ARE THE EXPECTATIONS OF THIS ADVISORY BOARD TO US? TO YOU? HOW IS IT SUPPOSED TO FUNCTION WITHIN THE CONSTRAINTS OF WHAT WE HAVE? AND WHAT IS THEIR DUTY? AND HOW ARE WE GOING TO HONOR THAT RESPONSIBILITY? AND HOW ARE THEY GOING TO HONOR THAT RESPONSIBILITY? CERTAINLY, SUPERVISOR ANTONOVICH HAS MADE IT CLEAR THAT HE DOESN'T SUPPORT IT BECAUSE HE JUST WANTS TO HEAR FROM THE DEPARTMENT. HE DOESN'T CARE WHAT THIS ADVISORY SAYS ONE WAY OR ANOTHER AND I CAN APPRECIATE THAT'S STRAIGHTFORWARD AND HONEST. WHAT I DON'T KNOW IS HOW YOU'RE FEELING, HOW THE DEPARTMENT IS FEELING AND EVEN HOW MY COLLEAGUES ARE FEELING. I THINK IT'S VERY UNEVEN AND I'M THE SAME WAY. WE'RE NOT GOING TO PAY ATTENTION, WE DON'T CARE WHAT THEY SAY. IF WE DON'T THINK IT HAS VALUE TO US, THEN LET'S NOT WASTE EACH OTHER'S TIME. YOU KNOW, LET'S PUT THE LILY ON THE COFFIN AND SEND THEM ON THEIR WAY.

24





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1 **DR. THOMAS GARTHWAITE:** WELL, LET ME-- I JUST WANT TO RESPOND  
2 TO THAT. ONE OF THE THINGS THAT'S YOU'VE BEEN SAYING IN THAT I  
3 VERY MUCH VALUE THE OPINION. AND I DON'T EXPECT PEOPLE TO  
4 AGREE WITH ME. I LEARN THE MOST WHEN PEOPLE DISAGREE, ASK ME  
5 THE QUESTIONS WHY AND THE DIALOGUE OF GOING BACK AND FORTH AND  
6 TRYING TO CONVINCE SOMEBODY THAT ONE POSITION OR ANOTHER MIGHT  
7 BE RIGHT OR WRONG. AND SO, TO ME, THAT'S EXTREMELY HELPFUL. I  
8 GUESS WHAT ISN'T HELPFUL TO ME IS THAT, WHEN WE WORK VERY HARD  
9 ON A POSITION, THAT THE RESPONSE IS, "WELL, THAT'S NOT  
10 ACCEPTABLE," AND THERE'S NO ALTERNATIVE OF WHAT'S ACCEPTABLE  
11 AND THERE'S NO ENDORSEMENT THAT THE STATUS QUO IS ENOUGH, WE  
12 CAN JUST, YOU KNOW-- THIS IS-- YOU'RE ALREADY DOING AS MUCH AS  
13 YOU CAN DO TO FIX KING DREW. TO SAY, "NO, THAT'S NOT  
14 ACCEPTABLE WITHOUT..."

15

16 **SUP. MOLINA, CHAIR:** WHAT DO YOU MEAN BY THAT, WHAT WAS THAT  
17 NOT ACCEPTABLE?

18

19 **DR. THOMAS GARTHWAITE:** WELL, TO SAY THAT OUR RECOMMENDATIONS,  
20 FOR INSTANCE, THAT WE MADE TO THE BOARD, WHICH INCLUDES  
21 EXPANDING OUTPATIENT AND CLOSING INPATIENT, OBSTETRICS AND  
22 PEDIATRICS IS, IF THAT'S NOT ACCEPTABLE, IS WHAT WE'RE DOING,  
23 CAN YOU ENDORSE THAT WHAT WE'RE DOING IS EVERYTHING WE NEED TO  
24 DO? OR CAN YOU SAY "WHAT ARE THE OTHER THINGS THAT YOU THINK



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1 WE NEED TO BE DOING THAT ARE GOING TO BE HELPFUL IN  
2 STABILIZING..."

3

4 **SUP. MOLINA, CHAIR:** BUT, DR. GARTHWAITE, WHEN YOU MET WITH ME  
5 THAT MORNING AND OUTLINED YOUR RECOMMENDATION, I TOLD YOU WHAT  
6 I DIDN'T THINK WAS ACCEPTABLE...

7

8 **DR. THOMAS GARTHWAITE:** YOU DID, YES.

9

10 **SUP. MOLINA, CHAIR:** ...AND YOU IGNORED IT, TOO.

11

12 **DR. THOMAS GARTHWAITE:** I BEG TO DIFFER BUT...

13

14 **SUP. MOLINA, CHAIR:** I TOLD YOU THAT I DID NOT THINK THAT YOU  
15 SHOULD-- THAT YOU HAD TO WORK WITH SOME OF THE CONGRESSIONAL  
16 FOLKS, SOME OF THE POLITICAL FOLKS, THAT I FELT IT WAS VERY  
17 IMPORTANT THAT, IF WE WERE GOING TO TAKE SUCH A BOLD STEP,  
18 THAT YOU TRY AND GET THEM TO AT LEAST HAVE, YOU KNOW, BETTER  
19 KNOWLEDGE AS TO RATIONALE AND THE REASON WHY BEFORE WE MOVED  
20 FORWARD, WHETHER IT WAS REALLY ESSENTIAL THAT, AT THIS POINT  
21 IN TIME, WE BE THAT DRAMATIC ABOUT ELIMINATING MORE SERVICES  
22 WITHOUT REALLY GETTING THEM TO UNDERSTAND WHERE WE WERE GOING.  
23 YOU CHOSE TO JUST CALL THEM BY PHONE AND TELL THEM AND REALLY  
24 DIDN'T SEEK THEIR INPUT. SO YOU IGNORED MY ADVICE. THAT DIDN'T



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1 MEAN THAT YOUR RECOMMENDATIONS SHOULDN'T COME FORWARD OR  
2 ANYTHING ELSE BUT, YOU KNOW, IT IS A TWO-WAY STREET, SIR.

3

4 **DR. THOMAS GARTHWAITE:** OH, I AGREE WITH THAT BUT I WOULD POINT  
5 OUT TO YOU THAT I BELIEVE WHAT WE DID WAS TO INFORM THEM THAT  
6 WE WERE PUTTING FORWARD OUR INITIAL REPORT TO THE BOARD, THAT  
7 THAT BOARD WOULD-- THAT WOULD CONTAIN MULTIPLE  
8 RECOMMENDATIONS, THAT WE WERE ON A CALL TO EXPLAIN SO THAT YOU  
9 HEARD FIRSTHAND THE RATIONALE BEHIND THOSE BUT THAT THERE  
10 WOULD BE AN EXTENDED PROCESS BY WHICH THERE WOULD BE MORE  
11 EDUCATION, THERE WOULD BE MORE DIALOGUE AND DISCUSSION, PLENTY  
12 OF TIME FOR PUBLIC COMMENT. THAT THIS WAS NOT A SIMPLE  
13 PROCESS, THIS WASN'T A DECISION, THIS WAS A RECOMMENDATION  
14 THAT THEY-- THAT, OBVIOUSLY, I FULLY UNDERSTOOD WOULD NOT BE  
15 WELL ACCEPTED BY EVERYONE BUT THAT WE HAD TO BRING FORWARD A  
16 RECOMMENDATION TO YOU. IF WE STARTED WITH, YOU KNOW, THAT  
17 RECOMMENDATION TO THE BROADEST COMMUNITY...

18

19 **SUP. MOLINA, CHAIR:** I THINK THERE ARE THREE CONGRESSIONAL  
20 MEMBERS.

21

22 **DR. THOMAS GARTHWAITE:** BUT I THINK-- I-- I FEEL UNDER THE-- IF  
23 THAT'S THE WAY THAT WE SHOULD DEVELOP RECOMMENDATIONS, I'M  
24 HAPPY TO DO THAT.

25



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1   **SUP. MOLINA, CHAIR:** BELIEVE ME, I UNDERSTAND. WHAT I'M TRYING  
2   TO POINT OUT IS THAT YOU AND I DIFFERED AS WELL, OKAY, ON THAT  
3   ONE AND YOU DIDN'T-- I MEAN, YOU DIDN'T SAY, "NO, I'M NOT  
4   GOING TO DO IT." YOU SAID, "OH, OKAY, WE'LL DEAL WITH THAT."  
5   AND THEN THERE WAS A CONFERENCE CALL. IT WASN'T A CLEAR  
6   DIALOGUE. AND THEN, VERY FRANKLY, THEY WEREN'T ALLOWED TO ASK  
7   ANY QUESTIONS FOR CLARIFICATION. ALL I AM SAYING, DR.  
8   GARTHWAITE, IS THAT I THINK WE HAVE TO HAVE A BETTER  
9   UNDERSTANDING OF HOW YOU VIEW THIS ADVISORY, HOW YOU THINK  
10  IT'S GOING TO WORK IN CONCERT WITH US AND IF, IN FACT, IF  
11  YOU'RE GOING-- HOW YOU'RE GOING TO BUILD THE KIND OF INTEGRITY  
12  AND I WANT TO SAY-- GIVE MERIT TO THE RECOMMENDATIONS, NOT  
13  JUST THAT WE HAVE TO AGREE OR DISAGREE, BUT HOW WERE YOU GOING  
14  TO DO IT. I MEAN, YOU AND I DON'T AGREE AND DISAGREE ALL OF  
15  THE TIME ON THESE THINGS BUT THAT, YOU KNOW, THERE'S STILL A  
16  RESPONSIBILITY AND A DUTY TO MOVE FORWARD ON MANY OF THE  
17  ISSUES OF OUR RESPONSIBILITIES TO THE DEPARTMENT AND THAT'S  
18  WHAT I WANT TO UNDERSTAND. EVEN THOUGH WE MAY DISAGREE WITH  
19  THE ADVISORY OR THEY MAY PUT FORTH SOMETHING THAT WE WOULDN'T  
20  NECESSARILY AGREE, ARE WE STILL GOING TO HONOR THEIR INPUT ON  
21  VARIOUS ISSUES OR ARE WE JUST GOING TO WRITE THEM OFF? THE  
22  IMPRESSION I'M GETTING FROM MY COLLEAGUES IS THAT IT LOOKS  
23  LIKE WE WANT TO WRITE THEM OFF AND YET I'M NOT SURE. THIS IS A  
24  SIMPLE BYLAW CHANGE BUT, IF THERE'S A DISAGREEMENT WITH THE  
25  BYLAW CHANGE, THEN I THINK WE NEED TO LET THEM KNOW. NO, WE



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1 DON'T WANT ANY COMMUNITY MEMBERS, HERE'S THE REASON WHY, AND  
2 THAT'S WHAT IS SO UNCLEAR. I'M NOT SURE IF IT'S SOMETHING ELSE  
3 THAT WE NEED TO CLARIFY. SO I AGREE THAT WE SHOULD CONTINUE  
4 THIS ITEM BUT IS IT JUST THIS BYLAW CHANGE OR IS IT BROADER  
5 THAN THAT?

6

7 **DR. THOMAS GARTHWAITE:** I UNDERSTAND.

8

9 **SUP. KNABE:** I THINK YOU OUGHT TO GIVE THE REST OF US A CHANCE  
10 TO RESPOND TO THE FACT THAT YOU'RE SAYING THAT YOU THINK IT'S  
11 BROADER THAN THAT. I THINK IT'S VERY SPECIFIC AS TO WHAT WE'RE  
12 ATTEMPTING TO DO HERE, IS TO CLARIFY THESE ISSUES. THE FIRST  
13 CONFLICT WAS THE RECOMMENDATION THAT DR. GARTHWAITE BROUGHT  
14 FORWARD THAT MANY OF US MAY OR MAY NOT HAVE AGREED WITH BUT  
15 THE H.A.B. JUST OUTRIGHT REJECTED IT.

16

17 **SUP. MOLINA, CHAIR:** IS THAT WRONG?

18

19 **SUP. KNABE:** THIS IS WHERE I AGREE WITH YOU, THAT THERE HAS TO  
20 BE SOME WORKING RELATIONSHIP.

21

22 **SUP. MOLINA, CHAIR:** BUT IS THAT WRONG?

23

24 **SUP. KNABE:** WELL, I GUESS MAYBE THEN I MISUNDERSTOOD THE  
25 HOSPITAL ADVISORY BOARD. I FELT THAT THEY WERE PUT TOGETHER TO



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1 GIVE US ADVICE AND INPUT OF SOME SORT, TO RESPOND, MAYBE, NOT  
2 MAYBE BUT TO RESPOND TO DR. GARTHWAITE'S RECOMMENDATION AS A  
3 GROUP, AS SORT OF AN INDEPENDENT, OUTSIDE BODY.

4

5 **SUP. MOLINA, CHAIR:** BUT THEY DID.

6

7 **SUP. KNABE:** YEAH, THEY SAID NO, THEY DIDN'T AGREE WITH IT.  
8 THEY WERE QUOTED IN PUBLIC AS SAYING NO BEFORE WE EVEN  
9 DISCUSSED IT AT THE BOARD HERE.

10

11 **SUP. MOLINA, CHAIR:** WELL, BUT I-- I DON'T-- WELL, THEN, SEE,  
12 THAT'S WHAT I MEAN, DR. GARTHWAITE. WE NEED TO HAVE A CLEAR  
13 UNDERSTANDING, HOW ARE WE SUPPOSED TO GET THAT INPUT? I THINK  
14 THAT DON MAY BE CORRECT BUT I DO THINK YOU DID DISCUSS IT WITH  
15 THEM. I DON'T...

16

17 **SUP. KNABE:** BUT NOT ENOUGH. THEY BOTH-- I MEAN, HE DID NOT  
18 TAKE THE TIME AND EFFORT TO HAVE A, YOU KNOW, THERE WERE  
19 INDEPENDENT MEETINGS OF INDEPENDENT PEOPLE BUT TO SIT DOWN AND  
20 TO WORK WITH THE HOSPITAL ADVISORY BOARD, THAT CONVERSATION  
21 DIDN'T TAKE PLACE. I MEAN, IT'S ALWAYS A TWO-WAY STREET AND  
22 THE HOSPITAL ADVISORY BOARD RESPONDED IN A WAY WITH OUTRIGHT  
23 REJECTION.

24



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1    **SUP. MOLINA, CHAIR:** DID THEY PREVENT THAT FROM HAPPENING, DR.  
2    GARTHWAITE?

3

4    **SUP. BURKE:** ARE WE TALKING ABOUT THE ADDITION OF THE  
5    ADMINISTRATOR OR ARE WE TALKING ABOUT THE COMMUNITY MEMBER OR  
6    ARE WE TALKING ABOUT SOMETHING ELSE?

7

8    **SUP. KNABE:** WE'RE TALKING ABOUT THE ORIGINAL...

9

10   **SUP. BURKE:** THE RECOMMENDATION?

11

12   **SUP. KNABE:** NO, THE RECOMMENDATION OF...

13

14   **SUP. MOLINA, CHAIR:** DON? OKAY. LET ME JUST SAY-- THAT'S  
15   EXACTLY THE POINT.

16

17   **SUP. BURKE:** CAN I FIND OUT?

18

19   **SUP. MOLINA, CHAIR:** EXCUSE ME, MS. BURKE. THAT'S EXACTLY THE  
20   POINT THAT I'M TRYING TO MAKE, IS THAT THIS WHAT IS BEFORE US  
21   IS ONLY THE EXPANSION OF THE BOARD, OKAY? NOW, EITHER WE  
22   SUPPORT THIS OR WE DON'T SUPPORT THIS.

23

24   **SUP. ANTONOVICH:** THAT'S NOT WHAT IT IS. IT'S MORE THAN THAT.

25





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1    **SUP. MOLINA, CHAIR:** I UNDERSTAND. THAT'S WHY...

2

3    **SUP. ANTONOVICH:** IT'S THE WHOLE BY-LAWS. IT'S THE FIRST TIME  
4    THE BY-LAWS HAVE BEEN BEFORE US.

5

6    **SUP. YAROSLAVSKY:** NO, IT'S THE FIRST TIME. IT WAS CONTINUED  
7    TWO WEEKS. THIS IS THE FIRST TIME THE BYLAWS HAVE BEEN BEFORE  
8    US.

9

10   **SUP. ANTONOVICH:** FOR A DISCUSSION.

11

12   **SUP. YAROSLAVSKY:** SO THIS IS THE FIRST TIME I HAVE HAD AN  
13   OPPORTUNITY TO LOOK AT THE ENTIRE BYLAWS COMPREHENSIVELY. AND  
14   I HAVE MORE THAN ONE OR TWO PROBLEMS WITH IT. BUT WHEN I GET A  
15   CHANCE TO SPEAK, MAYBE I CAN ARTICULATE THAT.

16

17   **SUP. MOLINA, CHAIR:** I WILL. AND I GAVE YOU EACH A CHANCE. I  
18   WAS THE LAST MEMBER. I LET YOU EACH SPEAK FIRST.

19

20   **SUP. YAROSLAVSKY:** BUT YOU'VE ASCRIBED ALL KINDS OF THINGS TO  
21   ALL OF US AND WE'RE SITTING HERE LISTENING FOR THE LAST 45  
22   MINUTES. THAT'S JUST NOT FAIR, MS. MOLINA.

23

24   **SUP. MOLINA, CHAIR:** 45 MINUTES. OKAY. LET'S GET THE DAMN TIMER  
25   OUT. I LET YOU EACH SPEAK FIRST, ALL RIGHT? I WILL NOW SIT



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1 BACK AGAIN AND LET YOU EACH SPEAK AGAIN AND THEN I WILL GO  
2 AHEAD. MR. KNABE, YOU FIRST. GO AHEAD.

3

4 **SUP. KNABE:** WELL, I MEAN, I THINK THAT I TRIED TO ARTICULATE.  
5 WHAT I WAS REFERRING TO, SUPERVISOR BURKE, WAS THE  
6 RECOMMENDATION THAT CAME BEFORE THIS BOARD AS RELATED TO THE  
7 SERVICES, BOTH IN THE BEILENSON HEARING PROCESS...

8

9 **SUP. BURKE:** THE O.B. AND THE PEDIATRICS?

10

11 **SUP. KNABE:** RIGHT. AND THAT WHOLE SITUATION WHERE THERE, I  
12 FELT, WAS A LACK OF COOPERATION BETWEEN THE HOSPITAL ADVISORY  
13 BOARD AND DR. GARTHWAITE, WHO SITS AS A MEMBER OF THAT. SO  
14 THAT WAS THE ISSUE I WAS TALKING ABOUT. ONE, WHERE THERE WAS A  
15 DISAGREEMENT BUT THE DISAGREEMENT ON THE OTHER SIDE, WE GOT  
16 NOTHING BACK FROM H.A.B. OTHER THAN OUTRIGHT REJECTION AND  
17 QUOTES IN THE NEWSPAPER THAT SAID THEY SHOULDN'T DO THIS. I  
18 MEAN, WITHOUT THIS-- AND THAT WAS A FAILURE, I THOUGHT, OF DR.  
19 GARTHWAITE AND THE H.A.B. NOT WORKING TOGETHER. I CONCUR WITH  
20 SUPERVISOR MOLINA THAT SOMEHOW WE NEED TO CLARIFY THIS WORKING  
21 RELATIONSHIP. THE CONCERN THAT I HAVE AS IT RELATES TO THIS  
22 ONE LITTLE ISSUE BEFORE US TODAY ABOUT THE EXPANSION IS, IF  
23 YOU PUT THE C.E.O. AS A VOTING MEMBER, DOES THAT GIVE  
24 EVERYBODY AN OPPORTUNITY TO PIT US AS A BOARD AGAINST THE  
25 C.E.O.? DOES THE HOSPITAL ADVISORY BOARD SAY, "WELL, HERE, THE



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1 C.E.O. SAYS THIS AND YOU DISAGREE WITH THIS." SO, I MEAN, FROM  
2 THAT PARTICULAR STANDPOINT, THOSE KINDS OF ISSUES NEED TO BE  
3 ADDRESS AND THEY BE CLARIFIED BECAUSE, AT THE END OF THE DAY,  
4 WHILE WE'RE TRYING TO DEAL WITH COMMUNITY NEEDS AND COMMUNITY  
5 INPUT, THE REAL ISSUE HERE BEFORE US IS THE CERTIFICATION,  
6 J.C.A.H.O. AND C.M.S., AND SOMEHOW I THOUGHT THE PART OF THE  
7 H.A.B. WAS TO HELP US WITH THAT PROCESS, WAS TO LOOK AT WHAT  
8 WE'RE DOING AS IT RELATES TO TRYING TO SAVE THE HOSPITAL, AND  
9 TRYING TO PUT US IN A POSITION THAT J.C.A.H.O. IS GOING TO BE  
10 POSITIVE, C.M.S. IS GOING TO BE POSITIVE AND WE MOVE FORWARD  
11 WITH THOSE PARTICULAR SERVICES. SO WHATEVER WE DO AND HOWEVER  
12 WE DO IT, THOSE ISSUES NEED TO BE CLARIFIED ABOUT THAT WORKING  
13 RELATIONSHIP. I MEAN, I'D EVEN GO AS FAR AS, AT SOME POINT  
14 MAYBE, I MEAN, I'M NOT SURE THAT YOU SHOULD BE A VOTING MEMBER  
15 OF THE HOSPITAL ADVISORY BOARD BECAUSE OF THE POTENTIAL  
16 CONFLICT OF YOUR RECOMMENDATIONS AND RESPONSIBILITY TO US,  
17 JUST AS I HAVE A PROBLEM WITH THE C.E.O. OF THE HOSPITAL BEING  
18 A VOTING MEMBER BECAUSE, CLEARLY, THAT WAS NOT WHAT WE SET UP  
19 IN THE BEGINNING. WE WERE LOOKING FOR INDEPENDENT EXPERTS IN  
20 HOSPITAL OPERATION. I MEAN, I AGREE THAT WE NEED TO, YOU KNOW,  
21 WORK WITH THE MEMBERS OF CONGRESS AND OTHERS BUT THEY HAVE NO  
22 EXPERIENCE IN OPERATING A HOSPITAL, JUST LIKE WE DON'T, AND SO  
23 WE WERE LOOKING FOR THAT EXTRA STEP, THAT EXTRA POTENTIAL  
24 INDEPENDENCE AS AN OPERATING BODY. SO I THINK WE NEED THE TWO



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1 WEEKS, I AGREE WITH SUPERVISOR MOLINA, TO CLARIFY THOSE  
2 ISSUES.

3

4 **DR. THOMAS GARTHWAITE:** CAN I JUST MAKE TWO QUICK COMMENTS. ONE  
5 IS THAT, YOU KNOW, I TAKE SOME RESPONSIBILITY. I WENT TO THE  
6 HOSPITAL ADVISORY BOARD IN JULY AND TOLD THEM THAT I FELT, I  
7 WAS UNDER THE OBLIGATION FOR PROVIDING RECOMMENDATIONS IN  
8 AUGUST AND THAT WE NEEDED THEIR INVOLVEMENT AND PLEASE COME.  
9 AND I THINK I ASSUMED, BECAUSE DR. FLORES AND MR. LOCK CAME TO  
10 SOME OF THE MEETINGS THAT WE HAD, THAT THEY UNDERSTOOD THAT  
11 THIS WAS ABOUT PROVIDING A RECOMMENDATION. WHEN WE WENT BACK  
12 AND TRIED TO RECONSTRUCT THE COMMUNICATION FAILURES, I MEAN,  
13 THEY THOUGHT THAT THESE WERE GOING TO BE A SERIES OF DIFFERENT  
14 POSSIBILITIES, NOT A CONCRETE RECOMMENDATION. SO I THINK THAT  
15 THEY DID NOT CALL AN EMERGENCY MEETING OF THE H.A.B., WHICH  
16 REALLY WOULD HAVE BEEN MUCH MORE APPROPRIATE SO THAT WE COULD  
17 GET THEIR FULL INPUT PRIOR TO THAT. SO I THINK THIS IS JUST  
18 BUSY PEOPLE MISCOMMUNICATING AND I REGRET THAT IT HAPPENS BUT  
19 I THINK THAT'S LEGITIMATELY WHAT HAPPENED THERE. AND THE  
20 SECOND THING IS THAT, YOU KNOW, THE HOSPITAL ADVISORY BOARD IS  
21 FULL OF CONFLICT, THAT THE PRESIDENT OF DREW AND THE HEAD OF  
22 THE PROFESSIONAL STAFF ASSOCIATION, MYSELF, C.E.O. ARE ALL, TO  
23 A LARGE DEGREE, CONFLICTED AND I SUPPOSE PROBABLY EVEN THE  
24 HEAD OF THE UNION REPRESENTATIVE ARE VERY MUCH CONFLICTED  
25 THERE AND THEY DO NOT MEET YOUR INDEPENDENCE TESTS.



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1

2 **SUP. MOLINA, CHAIR:** MR. YAROSLAVSKY.

3

4 **SUP. YAROSLAVSKY:** MR. JANSSEN, I ASKED A QUESTION ABOUT 40  
5 MINUTES AGO THAT WAS RELATED TO THREE DIFFERENT PEOPLE AS TO  
6 WHO PRIMARILY PARTICIPATED IN THE DRAFTING OF THE BYLAWS THAT  
7 ARE NOW BEFORE US. COULD YOU TELL ME WHAT YOU HAVE LEARNED?

8

9 **C.A.O. JANSSEN:** YES. THANK YOU, MADAM CHAIR, SUPERVISOR. IN  
10 THE INTERIM, I TALKED TO ANITA LEE, COUNTY COUNSEL, WHO HELPED  
11 WRITE THE BYLAWS. THE SUBCOMMITTEE THAT WAS CHARGED WITH  
12 WORKING WITH HER ON THE BYLAWS WAS HANK WELLS AND KATHY OCHOA.  
13 SHE SAID THE CHAIR, HECTOR FLORES, HAD VERY LITTLE TO DO WITH  
14 THE CHANGES IN THE BYLAWS. WHAT I SUGGESTED TO HER, AS A  
15 RESULT OF THAT DISCUSSION, THAT IT WOULD BE HELPFUL IF SHE  
16 PROVIDED FOR YOUR BOARD IN YOUR NEXT DISCUSSION AN EXPLANATION  
17 OF WHY THE RECOMMENDATIONS WERE CHANGED FROM FEBRUARY AND WHO  
18 MADE THE RECOMMENDATION. FOR EXAMPLE, THE ISSUE OF MAKING THE  
19 EXECUTIVE OFFICER OF M.L.K. A VOTING MEMBER CAME FROM HANK  
20 WELLS. HANK WELLS IS A HOSPITAL EXPERT AND, ACCORDING TO HANK,  
21 HE HAS, IN THAT CAPACITY, BOTH BEEN A VOTING MEMBER AND NOT A  
22 VOTING MEMBER OF A GOVERNING BOARD. SO IT WAS HIS SUGGESTION  
23 THAT THAT POSITION BE A VOTING MEMBER. YOU HAVE YOUR  
24 PROFESSIONAL ASSOCIATION, A VOTING MEMBER. YOU HAVE CONFLICTS,  
25 YOU HAVE KATHY OCHOA A VOTING MEMBER. YOU HAVE CONFLICTS ALL



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1 OVER THE PLACE, AS TOM JUST INDICATED. THE ISSUE OF EXPANDING  
2 THE BOARD TO THE ADDITIONAL TWO OR THREE MEMBERS CAME FROM  
3 SYLVIA DREW IVY, A MEMBER OF THE BOARD, AS A WAY THAT YOUR  
4 BOARD COULD ADD COMMUNITY REPRESENTATION IF YOU WANTED TO. SO  
5 I THINK IT WOULD BE VERY HELPFUL TO THE DISCUSSION, BECAUSE  
6 THERE IS A LOT OF CONFUSION, SOME UNDERCURRENT ABOUT WHAT IS  
7 OR IS NOT GOING ON, IF SHE PROVIDES, FOR YOUR CONSIDERATION AT  
8 THE NEXT MEETING, EXACTLY WHAT THE CHANGES WERE, WHO  
9 RECOMMENDED THEM AND WHY. I THINK THAT WOULD HELP THE  
10 EXPLANATION-- THE DISCUSSION A LOT.

11

12 **SUP. YAROSLAVSKY:** ALL RIGHT. I ASKED A VERY SIMPLE QUESTION OF  
13 DR. GARTHWAITE AND I DON'T THINK HE SHOULD BE PUNISHED OR  
14 SCOLDED FOR ANSWERING MY QUESTION BUT I GUESS THAT'S THE WAY  
15 IT IS. MY QUESTION TO HIM WAS, WHAT ARE HIS-- HE IS THE ONE  
16 WHO IS GOING TO HAVE TO LIVE WITH THE STRUCTURE FAR MORE THAN  
17 WE. HE IS THE ONE, OPERATIONALLY, DAY TO DAY. HE AND HIS STAFF  
18 ARE GOING TO HAVE TO WORK WITH THIS STRUCTURE. AND IT'S  
19 IMPORTANT FOR ME, IF NOT FOR ANYBODY ELSE, IT'S IMPORTANT FOR  
20 ME TO KNOW HOW MY DIRECTOR OF HEALTH FEELS ABOUT THE  
21 STRUCTURE. AND, IF HE HAS A PROBLEM WITH IT, NOTWITHSTANDING  
22 WHAT THE OTHER 11 OR 12 MEMBERS OF THE H.A.B. HAVE-- THEIR  
23 OPINION IS, I WANT TO KNOW ABOUT IT, BECAUSE NONE OF THE OTHER  
24 11 ARE PAID TO DO DR. GARTHWAITE'S JOB. AND THEN I CAN MAKE A  
25 JUDGMENT WHETHER DR. GARTHWAITE IS BEING OVERLY SENSITIVE OR



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1 OVERLY DEFENSIVE OR OVERLY ANAL OR WHETHER HE'S GOT A POINT.  
2 AND I THINK IT'S IMPERATIVE THAT WE HAVE YOUR INPUT. AND I  
3 DON'T HAVE A PROBLEM IF IT DIFFERS FROM THE OTHER MEMBERS OF  
4 THE BOARD. YOU WERE THE ONLY PERSON ON THE-- OBVIOUSLY, ON  
5 THE-- ON YOUR RECOMMENDATION TO SUPPORT YOUR OWN  
6 RECOMMENDATION. NOW, I DO HAVE PROBLEMS WITH WHAT'S HAPPENING  
7 OVER THERE. I MEAN, I'VE HEARD MORE THAN RUMORS. MY  
8 INFORMATION NOW TELLS ME THAT THEY ARE NOT GOING TO MAKE AN  
9 ALTERNATIVE RECOMMENDATION TO YOUR AUGUST-- WAS IT AUGUST 5TH  
10 MEMORANDUM TO THE BOARD OR WHATEVER THE DATE WAS ON THE  
11 PROPOSED RESTRUCTURING AT-- FURTHER RESTRUCTURING AT M.L.K.  
12 AND THAT THEY'RE GOING TO BLAME IT ON THE LACK OF RESOURCES.  
13 THEY'RE JUST GOING TO STONEWALL THE REQUEST THAT THIS BOARD  
14 MADE IN A MOTION ASKING ALL COMERS, IF YOU HAVE ANY  
15 SUGGESTIONS, ANY ALTERNATIVES TO DR. GARTHWAITE'S PROPOSALS,  
16 MAKE THEM BY SEPTEMBER 30TH, I THINK WAS THE DATE WE SET  
17 FORTH, MAYBE IT WAS A WEEK LATER. AND MY INFORMATION NOW IS  
18 THEY'RE NOT GOING TO MAKE ANY SUCH RECOMMENDATION AND I GUESS  
19 ALL THE EXPERTISE THAT ALL OF THESE GREAT EXPERTS THAT WE HAVE  
20 ALL PUT ONTO THAT HOSPITAL ADVISORY BOARD DON'T HAVE  
21 SUFFICIENT EXPERTISE TO OFFER EVEN A CONCEPTUAL ALTERNATIVE TO  
22 WHAT YOU'VE PROPOSED. BUT THAT'S NOT THE WAY THEY'RE GOING TO  
23 SPIN IT, THAT'S NOT THE WAY THEY'RE GOING TO COMMUNICATE IT.  
24 THEY'RE NOT GOING TO SAY, "WE JUST DON'T HAVE ANY OTHER IDEAS,  
25 WE DON'T KNOW WHAT TO DO, IT'S A MESS," OR WHATEVER THE--





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1 ONE'S OPINION MIGHT BE. THEY'RE GOING TO SAY, "THE REASON WE  
2 CAN'T COME UP WITH AN IDEA IS BECAUSE WE DON'T HAVE THE  
3 RESOURCES." REMEMBER THEY CAME TO THIS BOARD AND THEY WANTED  
4 THEIR OWN ATTORNEY, THEY WANTED, YOU KNOW, SEVERAL HUNDRED  
5 THOUSAND DOLLARS IN STAFFING. THEY WANTED TO BE A SHADOW  
6 HEALTH DEPARTMENT TO YOU. THAT'S NOT WHAT THIS WAS DESIGNED TO  
7 BE. MAYBE THAT'S WHAT WE'LL DO WHEN WE GET-- IF AND WHEN WE  
8 GET TO THE HEALTH AUTHORITY CONCEPT BUT THAT'S NOT WHAT WE HAD  
9 HERE. THE OTHER THING IS, I'LL JUST GET IT OUT RIGHT NOW, FROM  
10 MY POINT OF VIEW, I DON'T FEEL COMFORTABLE THAT I'M A MEMBER  
11 OF A BOARD THAT IS OPERATING A HOSPITAL THAT'S LOST ITS  
12 ACCREDITATION. IT IS THE MOST URGENT THING THAT WE NEED TO  
13 FIX, IS TO GET THAT ACCREDITATION BACK AND I DON'T BELIEVE  
14 THAT WE NEED TO SET UP A GROUP OF DEBATING SOCIETIES. THIS--  
15 WE-- I DID NOT HAVE IN MIND TO SET UP THE HOUSE OF LORDS WHEN  
16 WE SET UP THE HOSPITAL ADVISORY BOARD, TO RUMINATE, TO  
17 DELIBERATE, TO TAKE OUR TIME. YOU'VE GOT A TEST TO PASS BEFORE  
18 THE END OF THIS YEAR, DON'T YOU, DR. GARTHWAITE, YOUR  
19 DEPARTMENT DOES, YOUR HOSPITAL?

20

21 **DR. THOMAS GARTHWAITE:** SEVERAL.

22

23 **SUP. YAROSLAVSKY:** SEVERAL TESTS TO PASS. AND, JUST JUDGING  
24 FROM THE LAST TIME WE HAD A GIVE-AND-TAKE HERE WITH MEMBERS OF  
25 THE HOSPITAL ADVISORY BOARD, WHICH I THINK WAS IN AUGUST,



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1 TIME-- TIME IS NOT AN ISSUE FOR THEM. WELL, TIME IS AN ISSUE  
2 FOR ME, UNLESS I'M MISREADING WHAT I'M HEARING FROM YOU AND  
3 FROM THE FEDERAL AUTHORITIES AND EVERYBODY WHO HAS BEEN  
4 INVOLVED IN THIS PROCESS IS THAT DECEMBER OR THEREABOUTS,  
5 C.M.S., THE FEDERAL CENTER FOR MEDICAID/MEDICARE SERVICES, THE  
6 ARM OF THE DEPARTMENT OF HEALTH WHICH IS GOING TO DETERMINE  
7 WHETHER WE'RE PASSING OR FAILING, IS GOING TO COME IN AND DO  
8 ANOTHER REVIEW OF KING DREW MEDICAL CENTER.

9

10 **DR. THOMAS GARTHWAITE:** RIGHT.

11

12 **SUP. YAROSLAVSKY:** SO I THINK IT'S NOT OUR VISION, CERTAINLY  
13 NOT MY VISION THAT'S CHANGED. WHEN WE SET UP THE H.A.B., AND I  
14 REMEMBER TALKING TO DOCTOR-- TO HANK WELLS ABOUT IT WHEN HE  
15 FIRST CAME HERE FROM NAVIGANT, WHEN HE FIRST GAVE HIS REPORT,  
16 I THINK IN JANUARY OF THIS YEAR, THAT THE PURPOSE OF THE  
17 H.A.B. WAS TO GIVE-- WAS TO GIVE YOU SOME EXPERT OPINION. NOT  
18 THAT NOBODY WANTS COMMUNITY OPINION BUT THAT WASN'T THE  
19 PURPOSE OF THE H.A.B. THERE'S PLENTY OF COMMUNITY INPUT BUT WE  
20 DON'T NEED TO HAVE COMMUNITY INPUT AT EVERY VENUE SO THAT THE  
21 EXPERT VIEWS DON'T SURFACE. IT'S INTERESTING TO ME. I LOVE  
22 KATHY OCHOA. I THINK SHE'S INCREDIBLE. BUT IF SHE'S DRIVING  
23 THE BYLAW ISSUE, IT EXPLAINS TO ME SOME OF THE THINGS THAT ARE  
24 IN HERE, AND I RESPECT HER OPINION BUT I KNOW SHE COMES FROM  
25 THE POINT OF VIEW SHE COMES FROM, JUST AS I COME FROM A POINT



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1 OF VIEW. I DON'T KNOW HANK WELLS AS WELL. I DON'T KNOW WHAT  
2 HIS-- WHERE HE'S COMING FROM BUT I DO KNOW THAT, IF YOU LOOK  
3 AT THIS DOCUMENT FROM BEGINNING TO END, IT IS DIFFERENT THAN  
4 WHAT I THOUGHT WE WERE SETTING UP WHEN WE WERE SETTING IT UP.  
5 NOW, THERE IS SOME VALUE TO THIS DOCUMENT. I THINK IT'S THE  
6 KIND OF-- SOME OF THE LANGUAGE THAT'S IN HERE IS THE KIND OF  
7 THING THAT YOU MIGHT WANT TO INCORPORATE WHEN WE SET UP THE  
8 HEALTH AUTHORITY. THAT'S-- I WOULD ALSO LIKE TO SEE US CONFINE  
9 IT MORE TO PEOPLE WHO ARE KNOWLEDGEABLE IN THE FIELD THAN NOT.  
10 OTHERWISE, IT'S OF LITTLE VALUE TO US OR TO YOU BUT I THINK  
11 IT'S CRITICAL THAT WE UNDERSTAND EACH OTHER AND I THINK IT'S  
12 CLEAR THAT WE UNDERSTAND WHAT YOUR LIMITATIONS ARE OR WHAT  
13 YOUR CONCERNS ARE AND HOW YOU THINK THIS MAY LIMIT YOUR  
14 ABILITY TO DO YOUR JOB, BECAUSE I DON'T WANT YOU COMING BACK  
15 HERE IN DECEMBER OR NOVEMBER SAYING, "WELL, YOU KNOW, I WAS  
16 RETICENT TO RAISE MY CONCERNS BECAUSE I WAS BEING-- I DIDN'T  
17 KNOW, YOU KNOW, I COULDN'T COUNT VOTES AND I WAS RETICENT TO  
18 TELL YOU MY HONEST OPINION," ONLY TO FIND OUT THAT, IF YOU HAD  
19 TOLD US YOUR HONEST OPINION, WE MIGHT HAVE MADE YOUR JOB A LOT  
20 EASIER. SO I THINK YOU JUST GOT TO CALL THEM AS YOU SEE THEM  
21 AND WE CAN MAKE A JUDGMENT AFTER THAT WHETHER WE AGREE WITH  
22 YOU OR NOT. THAT'S-- YOU'RE A BIG BOY AND WE'RE ALL BIG BOYS  
23 AND GIRLS. WE'LL DEAL WITH IT AT THAT POINT. BUT IF YOU ARE  
24 BEING MUZZLED OR IF YOU INFER THAT YOU'RE NOT BEING ASKED NOT  
25 TO SPEAK YOUR MIND, THEN IT'S A WASTE OF YOUR TIME, IT'S A



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1 WASTE OF OUR MONEY AND, FRANKLY, I THINK, IN THE LAST FEW  
2 MONTHS, YOU'VE SPOKEN YOUR MIND MUCH MORE CLEARLY AND  
3 COGENTLY, AND CONCISELY. NOT THAT I AGREE WITH EVERYTHING YOU  
4 SAID AND CERTAINLY NOT THAT EVERYBODY ELSE HAS AGREED WITH  
5 EVERYTHING YOU'VE SAID BUT AT LEAST YOU'VE GOT-- YOU'RE  
6 COMMUNICATING TO US A DIRECTION AND A SPECIFIC FOCUSED  
7 DIRECTION. AND I THINK THAT'S A BREATH OF FRESH AIR IN THIS  
8 DEPARTMENT, AND IT'S A BREATH OF FRESH AIR FOR US. WHETHER  
9 IT'S ENOUGH, YOU KNOW, TIME WILL TELL BUT I THINK IT'S  
10 CRITICAL THAT WE HAVE THAT AND I DON'T WANT TO DO ANYTHING  
11 THAT GOES BACKWARDS IN THAT REGARD. YOU READ THESE BYLAWS, AS  
12 I DON'T THINK I DISCUSSED IT WITH YOU, BUT YOU READ THESE  
13 BYLAWS AND I HAVE, AND I JUST DIDN'T KNOW WHERE THEY CAME  
14 FROM. THE FIRST SET OF BYLAWS I GOT, I DIDN'T KNOW WHAT IT WAS  
15 WORKING OFF OF, SO I ASKED FOR A LINED-OUT VERSION, WHICH DR.  
16 FLORES WAS KIND ENOUGH TO SEND. I GUESS I SHOULD HAVE TAKEN  
17 TYPING II BECAUSE I CAN'T READ THESE MARGINALIZED COMMENTS,  
18 BUT I THINK I FIGURED IT OUT. THERE ARE A NUMBER OF CHANGES  
19 THAT HAVE BEEN MADE, NOT FUNDAMENTAL. THEN I REALIZED, I NEVER  
20 SAW THE ORIGINAL DOCUMENT THAT HE AMENDED OR THAT YOUR BOARD,  
21 THE H.A.B., AMENDED. NEVER SAW IT. THERE WAS A REPORT THAT THE  
22 C.A.O. HAS PROVIDED FOR US IN FEBRUARY, I BELIEVE, IN  
23 CONJUNCTION WITH THE NAVIGANT REPORT AND WHAT HAVE YOU AND IT  
24 OUTLINED IT IN LAYMAN'S LANGUAGE AND THEN IT GOT TRANSLATED  
25 INTO THIS. I DIDN'T REALIZE THAT TWO WEEKS AGO WHEN THIS WAS



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1 BEFORE US THEN. ACTUALLY, I DIDN'T REALIZE THIS UNTIL YOU AND  
2 I MET TO DISCUSS THIS YESTERDAY. NOW IT MAKES A LOT MORE-- IT  
3 DOESN'T MAKE MORE SENSE, AT LEAST IT EXPLAINS WHERE WE ARE. SO  
4 I THINK THE TIME, IF IT'S TWO WEEKS OR THREE WEEKS, WHATEVER  
5 WE HAVE, IF YOU CAN HELP US FOCUS ON THAT, WORK WITH THE  
6 COUNTY COUNSEL, HOWEVER YOU'RE GOING TO DO-- JUST FOCUS US ON  
7 THIS. MUCH OF THIS IS BOILERPLATE. SOME OF IT IS NOT. I DON'T  
8 BELIEVE WE OUGHT TO HAVE 18 MEMBERS OF AN H.A.B. I WAS  
9 CONCERNED WHEN WE GOT IT UP TO-- WHAT DID WE ORIGINALLY  
10 APPOINT? 9? 7 TO 9? THIS IS GOING TO BE THE SIZE-- BIGGER THAN  
11 THE LOS ANGELES CITY COUNCIL. 13 NOW. BUT ORIGINALLY, IT WAS--  
12 WE APPOINTED-- WE APPROVED SOME 7, 8 OR 9 PEOPLE ORIGINALLY.  
13 DID WE APPROVE THE OTHER SIX?

14

15 **C.A.O. JANSSEN:** YEAH. THE SIZE WAS 13 AT THE OUTSET. THERE  
16 WERE 7 THAT WERE APPROVED IN FEBRUARY AND THEN THE REST WERE  
17 ADDED LATER SO IT STARTED AS 13.

18

19 **SUP. YAROSLAVSKY:** WHO ADDED-- DID WE APPROVE THE ADDITIONAL  
20 ONES?

21

22 **C.A.O. JANSSEN:** NO, YOU'VE APPROVED ALL THE APPOINTMENTS, YES.

23

24 **SUP. YAROSLAVSKY:** ALL OF THEM. SO I HAVE A NUMBER OF CONCERNS  
25 BUT I'LL WAIT AND SEE WHAT YOU COME UP WITH AND WHAT OTHERS



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1 COME UP WITH. YOU'RE NOT THE ONLY ONE THAT HAS THREE WEEKS TO  
2 WORK THIS OVER. BUT, ANYWAY, THAT'S MY VIEW AND MY FOCUS RIGHT  
3 NOW, MEMBERS, IS GETTING THROUGH THIS C.M.S. REVIEW. AND ALL  
4 OF THIS IS, FRANKLY, NOT A GOOD EXPENDITURE OF MY TIME OR YOUR  
5 TIME TO SPEND AN HOUR AND A HALF, TWO HOURS HERE THIS MORNING  
6 ARGUING ABOUT BYLAWS FOR AN ADVISORY COMMITTEE WHEN YOU'RE  
7 FACING GUILLOTINE, WE'RE ALL FACING THE GUILLOTINE IN THE NEXT  
8 60 TO 90 DAYS.

9

10 **SUP. MOLINA, CHAIR:** OKAY. THAT WAS 8 MINUTES, IT WASN'T 40  
11 MINUTES BEFORE AND IT HASN'T BEEN 2-1/2 HOURS JUST ON THIS  
12 ISSUE. MS. BURKE, YOU'RE NEXT.

13

14 **SUP. BURKE:** I WASN'T ASKING TO BE HEARD AGAIN BUT I'LL REPEAT  
15 WHAT I SAID. I DO THINK THAT THERE HAS TO BE A MECHANISM TO  
16 EVALUATE COMMUNITY NEED AND THAT IS ONE ROLE WHERE PEOPLE WHO  
17 ARE PART OF THE COMMUNITY, WHO HAVE THE EXPERTISE, CAN  
18 DETERMINE EXACTLY THE SERVICES THAT ARE NEEDED AND THAT INPUT,  
19 I DO THINK, IS IMPORTANT.

20

21 **SUP. MOLINA, CHAIR:** I WOULD AGREE.

22

23 **DR. THOMAS GARTHWAITE:** AGREE.

24



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1   **SUP. MOLINA, CHAIR:** DR. GARTHWAITE, I'M TRYING TO TALK TO YOU  
2   AND I'M NOT SCOLDING YOU, SO LET'S GO THROUGH THIS ONE MORE  
3   TIME, I'M GOING TO DO IT IN 3 MINUTES, NOT IN THE 8 MINUTES  
4   THAT SUPERVISOR-- I DO THINK THERE'S AN UNDERCURRENT HERE AND  
5   IT'S ALSO WITHIN THE DEPARTMENT OF-- AND I THINK WE WANT TO  
6   UNDERSTAND. C.M.S. ALSO CRITICIZED US, IF I REMEMBER  
7   CORRECTLY, ON THE ISSUE OF GOVERNANCE. IT IS ONE OF THE  
8   RESPONSIBILITIES THAT WE HAVE AS WELL. IT ALSO-- AND NAVIGANT  
9   CAME IN AND MADE A RECOMMENDATION WITH REGARD TO THE ISSUES OF  
10   GOVERNANCE AS THE ADVISORY. SO WE'RE NOT OFF TRACK. IT MAKES  
11   IT SOUNDS LIKE WE'RE SPENDING A LOT OF TIME ON SOMETHING THAT  
12   IS INSIGNIFICANT BUT, IF I REMEMBER CORRECTLY, IT WAS PART OF  
13   THE ISSUES THAT WE NEEDED TO ADDRESS.

14

15   **DR. THOMAS GARTHWAITE:** THAT'S CORRECT.

16

17   **SUP. MOLINA, CHAIR:** SO LET'S PUT OURSELVES BACK ON TRACK. NOW,  
18   THERE IS NO DOUBT THAT DETAILS LIKE BYLAWS CAN BE A VERY  
19   COMPLICATED ISSUE, IF YOU WANT. I'VE BEEN INVOLVED IN  
20   ORGANIZATIONS WHERE YOU CAN SPEND FOREVER CLARIFYING WHAT IS  
21   "IS", RIGHT? WE DON'T WANT TO GO THAT ROUTE. WHAT WE WANT TO  
22   DO IS CREATE A BETTER UNDERSTANDING OF OUR RESPONSIBILITIES  
23   AND DUTIES TO EACH OTHER. WHAT I WAS TRYING TO SAY BEFORE IS I  
24   THINK YOU NEED TO TELL US-- WE'VE HEARD FROM NAVIGANT, WE'VE  
25   HEARD FROM C.M.S. ABOUT THE ISSUES OF GOVERNANCE. IF THIS IS





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1 NOT A MODEL THAT IS GOING TO WORK FOR YOU, WE NEED TO KNOW. IF  
2 THERE IS A BETTER MODEL, YOU NEED TO LET US KNOW AND YOU NEED  
3 TO WORK IN CONCERT WITH NAVIGANT AND THE ADVISORY BECAUSE THE  
4 ISSUES OF GOVERNANCE ARE GOING TO CONTINUE. IT WAS THE  
5 UNDERSTANDING FOR MANY OF US THAT THIS WAS THE BEGINNING OF  
6 WHAT WE WOULD INSTITUTE AND I THINK WE SAID IT WAY BACK WHEN  
7 WE WERE FIRST PROPOSED THIS ISSUE, WHICH I THINK WAS FEBRUARY  
8 OF LAST YEAR-- OF THIS YEAR AND BASICALLY WE SAID IT MAY BE A  
9 MODEL THAT MIGHT WORK IN SOME OF OUR OTHER HOSPITALS, THAT  
10 RIGHT NOW WE WERE LEAVING IT EXCLUSIVELY HERE TO SEE HOW IT  
11 WOULD WORK. BUT I DO GET A SENSE, AND I WANT TO UNDERSTAND IT  
12 AS MUCH AS ANYBODY ELSE, AS TO WHAT IS OUR RELATIONSHIP AND  
13 YOUR RELATIONSHIP. SO WE DO NEED THAT CLARIFICATION. I DON'T  
14 KNOW THAT IT'S IN THE DETAILS OF THE BYLAWS. IT MAY BE. I  
15 DON'T KNOW. BUT WE DO NEED A FRAMEWORK FROM WHICH WE CAN GET A  
16 BETTER UNDERSTANDING OF HOW WE'RE GOING TO DO IT. IF THERE ARE  
17 CERTAIN PEOPLE THAT THIS BOARD DOESN'T SUPPORT, IF THERE IS  
18 CERTAIN INPUT, AS YOU SAID, YOU KNOW, WHAT IS COMMUNITY? SOME  
19 PEOPLE MIGHT LOOK AT COMMUNITY PEOPLE AS TO BE COMMUNITY  
20 ADVOCATES. YOU SAY COMMUNITY EXPERTISE IN THE AREA OF MANAGING  
21 OR RUNNING A HOSPITAL. I THINK THOSE CLARIFICATIONS NEED TO BE  
22 MADE BECAUSE, AT THE END OF THE DAY, WE HAVE ONE  
23 UNDERSTANDING, YOU HAVE ONE UNDERSTANDING, THE H.A.B. HAS  
24 ANOTHER UNDERSTANDING AND, AT THE END OF THE DAY, C.M.S. IS  
25 GOING TO COME IN AND SAY, "YOU'VE NOT ADDRESSED THE ISSUES OF



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1 GOVERNANCE." SO, IN TWO WEEKS, COULD YOU KIND OF PUT IT  
2 TOGETHER? AND I THINK THAT WHAT WE NEED TO HAVE A CLEAR  
3 UNDERSTANDING IS EITHER WE'RE GOING TO SUPPORT THEM OR NOT,  
4 BECAUSE I COULD JOIN WITH SUPERVISOR ANTONOVICH AND I WOULD  
5 RATHER BE HONEST WITH THEM AND SAY, "DON'T WASTE YOUR TIME  
6 ADVISING US OR GIVING US ADVICE" IF, IN FACT, WE'RE NOT GOING  
7 TO UTILIZE THEM TO THE EXTENT THAT WE SHOULD. I WOULD RATHER  
8 HAVE THAT KIND OF STRAIGHTFORWARD AND HONEST RELATIONSHIP.  
9 THIS STUFF ABOUT, YOU KNOW, IT'S ALL OVER THE PLACE. I SAID IT  
10 AS CLEARLY AND AS PLAINLY AS I COULD. YOU WANT "SWEETIE PIE"  
11 ON THE END OF IT? I CAN DO THAT, TOO.

12

13 **SUP. KNABE:** THAT WAS 6-1/2 MINUTES.

14

15 **DR. THOMAS GARTHWAITE:** NO, I APPRECIATE THAT.

16

17 **SUP. MOLINA, CHAIR:** YOU WANT SWEETIE PIE ON THAT, TOO, DON?  
18 GOOD.

19

20 **DR. THOMAS GARTHWAITE:** I WAS JUST GOING TO SAY THAT I THINK  
21 THAT-- A COUPLE THINGS. SINCE THE ISSUES WE HAD AROUND THE  
22 RECOMMENDATIONS AND I THINK SOME POOR COMMUNICATION. SEVERAL  
23 THINGS THAT WE'VE DONE RECENTLY GIVE ME ENCOURAGEMENT AND I  
24 THINK HAVE BROUGHT OUT THE USEFULNESS OF THIS BOARD. ONE HAS  
25 BEEN THAT DR. CHERNOFF AND I DISCUSSED CLINICAL ISSUES AND



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1 WHICH ONES WE SHOULD BRING FORWARD TO THE BOARD WITH HECTOR  
2 FLORES-- DR. FLORES PROBABLY ONCE A WEEK AND BRING HIM UP TO  
3 DATE ON WHAT'S GOING ON IN THE CLINICAL ARENA. AND THAT'S BEEN  
4 VERY HELPFUL. HE'S HAD VERY GOOD THOUGHTFUL SUGGESTIONS AND WE  
5 VALUE HIS EXPERTISE. AND I'LL BE VERY CLEAR ON THAT. SECONDLY,  
6 WE HAD A, QUOTE, "EMERGENCY MEETING" OR A RAPID CALL ON THE  
7 CAPITAL ASSET ISSUE AND WE GOT, I THINK, VERY GOOD  
8 SUGGESTIONS. IT BROUGHT TO US A DIFFERENT POINT THAN WE WOULD  
9 HAVE GOTTEN WITHOUT THE EXPERT HELP THERE AND I THINK THE MOST  
10 RECENT DISCUSSION IN CLOSED SESSION ON THE QUALITY REPORT FROM  
11 DR. KAISER'S GROUP WAS ALSO VERY SUBSTANTIVE AND IS IN THE  
12 DIRECTION THAT I WOULD-- I DEFINITELY WOULD VALUE-- I  
13 DEFINITELY VALUE AND LOOK FOR HELP IN IN THOSE AREAS SO...

14

15 **SUP. MOLINA, CHAIR:** THOSE ARE THE THINGS YOU NEED TO BRING TO  
16 US AND JUST, LIKE, SAY, "YEAH, THIS IS WHAT I NEED AND THIS IS  
17 WHAT WE WANT" BECAUSE WE HAVE TO HAVE A BETTER UNDERSTANDING.  
18 MR. JANSSEN, DID YOU WANT TO ADD SOMETHING? (LAUGHTER).

19

20 **C.A.O. JANSSEN:** WE'LL PREPARE THE EXPLANATION OF WHY THE  
21 CHANGES WERE MADE...

22

23 **SUP. MOLINA, CHAIR:** ALL RIGHT WITH THE LAWYERS AS WELL. AND  
24 THEN DR. GARTHWAITE IS GOING TO PREPARE A REPORT AT LEAST ON  
25 THE FORMATTING OF HOW WE'RE GOING TO INTERFACE WITH EACH



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1 OTHER. VERY GOOD. ALL RIGHT. THIS ITEM NOW IS CONTINUED UNTIL  
2 THE SECOND MEETING IN OCTOBER, IS THAT CORRECT? OCTOBER THE  
3 11TH. THANK YOU SO MUCH. ALL RIGHT. THAT WAS ITEM-- WHAT? 48.

4

5 **SUP. ANTONOVICH:** DR. GARTHWAITE, BEFORE YOU LEAVE, ON...

6

7 **SUP. MOLINA, CHAIR:** OH, I'M SORRY. DR. GARTHWAITE.

8

9 **SUP. ANTONOVICH:** ON THE NEXT ITEM, DR. GARTHWAITE, ON ITEM 57,  
10 THIS IS THE ISSUE RELATIVE TO CAPITAL PROJECTS.

11

12 **SUP. MOLINA, CHAIR:** OH, OKAY. THAT'S A REPORT THAT HAS BEEN  
13 SUBMITTED, ON ITEM 57.

14

15 **SUP. ANTONOVICH:** 57. QUESTION: IS-- WILL THE CAPITAL PROJECTS  
16 OR THE REFURBISHMENTS THAT ARE RELATED TO STATE LICENSING AND  
17 ACCREDITATIONS, WHICH WERE SEVERE ENOUGH TO PLACE OLIVE VIEW  
18 AND U.S.C. MEDICAL CENTER AND HARBOR AND OTHER CLINICS IN  
19 JEOPARDY OF LOSING ACCREDITATION, ARE THESE THE CAPITAL  
20 PROJECTS THAT ARE BEING RECOMMENDED?

21

22 **DR. THOMAS GARTHWAITE:** THE QUESTION IS, ARE THERE...

23



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1   **SUP. ANTONOVICH:** ARE THESE THE PROJECTS THAT ARE BEING  
2   RECOMMENDED TO PREVENT THE LOSS OF ACCREDITATION TO OUR OTHER  
3   FACILITIES?

4

5   **DR. THOMAS GARTHWAITE:** I DON'T-- I DON'T BELIEVE THAT THERE  
6   ARE ANY THAT ARE ABSOLUTELY CRITICAL ACCREDITATION. ALL OF OUR  
7   FACILITIES, EXCEPT KING DREW, HAVE RECENTLY SUCCESSFULLY  
8   PASSED JOINT COMMISSION ACCREDITATION AND I'M NOT AWARE THAT  
9   ANY OF THOSE WERE CONTINGENT ON CAPITAL PROJECTS. I DON'T  
10  BELIEVE THAT THEY'RE ABSOLUTELY NECESSARY BUT, AS YOU KNOW,  
11  THERE'S CONTINUED EVOLUTION OF THE STANDARDS AND SO A BUILDING  
12  THAT MET ACCREDITATION LAST YEAR MAY NOT MEET IT THE NEXT  
13  TIME, SO WE HAVE TO BE VERY ATTUNED TO THAT. AS WELL AS  
14  MAINTENANCE.

15

16  **SUP. ANTONOVICH:** RIGHT. IS THE DEPARTMENT'S STRATEGIC PLAN,  
17  DOES IT INCLUDE FACILITIES THAT WILL BE PROPOSED FOR CLOSURES  
18  OR HOW THE OPERATIONS OF THE DEPARTMENT WILL BE ALTERED?

19

20  **DR. THOMAS GARTHWAITE:** AT THE CURRENT TIME, WE ARE NOT  
21  ENTERTAINING CLOSURE OF ANY OF OUR FACILITIES, PER SE. AS YOU  
22  KNOW, WE HAD PREVIOUSLY CLOSED SEVERAL HEALTH CLINICS AND A  
23  VARIETY OF OTHER THINGS BUT OUR CURRENT STRATEGIC PLAN IS NOT  
24  PARTICIPATING ANY CLOSURES IN THE NEAR FUTURE.

25



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1   **SUP. ANTONOVICH:** ARE THERE ANY OF THE RECOMMENDATIONS IN YOUR  
2   JUNE 2002 STRATEGIC PLAN BEING IMPLEMENTED?

3

4   **DR. THOMAS GARTHWAITE:** WELL, YEAH. WE CONTINUE TO WORK ON-- ON  
5   THE JUNE 2002 STRATEGIC PLAN. I THINK CERTAINLY ONE OF THE  
6   CHALLENGES HAS BEEN THE EFFICIENCIES THAT KING DREW MEDICAL  
7   CENTER BASED ON ALL THE OTHER-- ON THE OTHER ISSUES, BUT I  
8   THINK THAT, AS WE RE-LOOK AT THE STAFFING PLAN FOR THAT  
9   MEDICAL CENTER AND THE OTHER THINGS WE'RE DOING THERE, WE DO  
10   HAVE THAT IN MIND AND I THINK YOU'LL BE ABLE TO SEE THAT OVER  
11   THE NEXT THREE TO SIX MONTHS AS WE REVIEW THAT STAFFING PLAN.

12

13   **SUP. ANTONOVICH:** WHEN WILL THE REPORT ON PROTOCOLS THAT ARE  
14   BEING IMPLEMENTED BY THE C.E.O. FACILITIES SUPPORT SERVICES  
15   STAFF AND BUILDING AND SAFETY MANAGERS TO MAKE SURE OUR  
16   HOSPITALS AND CLINICS ARE MEETING STATE LICENSING AND  
17   ACCREDITATION REGULATIONS BE COMPLETED?

18

19   **DR. THOMAS GARTHWAITE:** I DON'T KNOW THAT I KNOW THAT EXACT  
20   DATE BUT I CAN GET IT FOR YOU.

21

22   **SUP. ANTONOVICH:** OKAY. THAT WOULD BE HELPFUL. ALSO, MR.  
23   JANSSEN, WHEN WILL THE JOINT REPORT WITH DEPARTMENT OF HEALTH  
24   SERVICES IN OCTOBER IDENTIFY FUNDING ALLOCATIONS FOR THE 34.6  
25   MILLION DOLLARS NECESSARY FOR THE CAPITAL IMPROVEMENTS AND



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1 REFURBISHMENT PROJECTS NECESSARY TO BE IN COMPLIANCE WITH  
2 STATE LICENSING OR ACCREDITATION STANDARDS AT OUR COUNTY  
3 HOSPITALS? WILL YOUR REPORT HAVE THAT INFORMATION?

4

5 **C.A.O. JANSSEN:** YES, IT WILL, SUPERVISOR.

6

7 **SUP. ANTONOVICH:** AND ALSO, I STILL HAVEN'T RECEIVED THE  
8 INDIVIDUALS WHO WERE RESPONSIBLE FOR SIGNING OFF ON THE  
9 ABILITY OF THE SURGERY ROOMS AT M.L.K. AND THE MENTAL HEALTH  
10 WARDS THAT WERE UNSAFE, THOSE INDIVIDUALS WHO SIGNED OFF THAT  
11 THOSE WERE SUITABLE FACILITIES FOR SURGERY AND HOUSING VIOLENT  
12 MENTALLY ILL DERANGED PEOPLE.

13

14 **DR. THOMAS GARTHWAITE:** MY APOLOGIES. I'LL CHECK ON THAT.  
15 THANKS.

16

17 **SUP. ANTONOVICH:** THANK YOU.

18

19 **SUP. MOLINA, CHAIR:** DR. GARTHWAITE, THIS IS A REPORT. DO YOU  
20 WANT TO STATE YOUR REPORT? DO YOU WANT TO OUTLINE YOUR REPORT?  
21 YOU'RE NOT? I MEAN, MS. BURKE HAD SOME QUESTIONS, TOO.

22

23 **SUP. BURKE:** WELL, I JUST HAD, REALLY, A COMMENT IN TERMS OF  
24 THE SURGERY UNIT AT HARBOR, THAT BUILDING. WHILE IT MAY NOT BE





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1 A CITED ISSUE, IT'S ONE THAT WE KNOW VERY WELL, IF WE DON'T  
2 GET THAT UP, IT IS POTENTIALLY A CITING.

3

4 **DR. THOMAS GARTHWAITE:** I DIDN'T-- CERTAINLY WE DON'T MEAN TO  
5 SAY THAT IF IT'S NOT CITED BY A JOINT COMMISSION THAT WE DON'T  
6 HAVE SIGNIFICANT CAPITAL NEEDS. WE HAVE VARIOUS BUILDINGS AT  
7 VARIOUS AGES, SOME OF WHICH ARE QUITE OLD AND, BY MORE MODERN  
8 STANDARDS, PROBABLY INADEQUATE FOR SOME OF THE-- OR NEAR  
9 INADEQUATE FOR SOME OF THE CARE WE'RE TRYING TO GIVE IN THOSE  
10 AND THAT IT WOULD BE MUCH MORE FUNCTIONAL AND HELPFUL AND EVEN  
11 SAFER BY REMODELING AND BY CARRYING OUT SOME OF THOSE CAPITAL  
12 ASSET PLANS. SO I THINK IT'S A MATTER OF OCCASIONALLY BRINGING  
13 MAJOR PARTS OF OUR BUILDINGS UP AND BY NOT DEFERRING  
14 MAINTENANCE FOR TOO LONG. I THINK THAT THAT'S ALWAYS A  
15 CHALLENGE IN A SYSTEM THAT'S-- WHOSE FINANCES ARE ALWAYS AS  
16 TENUOUS AS OURS.

17

18 **SUP. MOLINA, CHAIR:** DR. GARTHWAITE, I WANT TO THANK YOU FOR  
19 THE REPORT. I'M SORRY, DON.

20

21 **SUP. KNABE:** I HAVE A QUESTION.

22

23 **SUP. MOLINA, CHAIR:** ALL RIGHT. GO AHEAD.

24



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1   **SUP. KNABE:** NO, I JUST-- YOU'VE IDENTIFIED ALMOST \$35 MILLION  
2   REQUIRED TO MEET ACCREDITATION STANDARDS. IS THERE ANY SENSE  
3   OF URGENCY IN SOME OF THOSE PROJECTS THAT MAY AFFECT PATIENT  
4   SAFETY OR...

5

6   **DR. THOMAS GARTHWAITE:** I THINK, IF THERE'S ANYTHING THAT WE  
7   THOUGHT WAS CRITICAL THAT WE DO THIS MONTH OR NEXT, THAT WE  
8   WOULD BE TELLING YOU THAT.

9

10   **SUP. KNABE:** OKAY.

11

12   **DR. THOMAS GARTHWAITE:** BUT IT-- YOU KNOW, IT'S JUST A MATTER  
13   OF TIMING AND TRYING TO, YOU KNOW, STAGE THESE-- ANYTHING THAT  
14   THAT'S CRITICAL, I PROMISE YOU, I'LL BRING AND-- THAT I BECOME  
15   AWARE OF, I WILL BRING THAT TO YOU IMMEDIATELY.

16

17   **SUP. KNABE:** OKAY. THANKS.

18

19   **SUP. MOLINA, CHAIR:** ALL RIGHT. I WANTED TO THANK YOU FOR THE  
20   REPORT AND THE QUICK RESPONSE. I WAS IMPRESSED WITH HOW QUICK  
21   WE GOT A RESPONSE BUT I WAS MORE IMPRESSED WITH THE NUMBER,  
22   WHICH WAS A LITTLE BIT FREAKING OUT AND THAT LED-- I MEAN, THE  
23   REASON I PUT IN THE MOTION AND WANTED TO KNOW ABOUT THIS IS I  
24   WAS VERY, VERY CONCERNED, WHEN WE SAW THE MARTIN LUTHER KING  
25   CAPITAL COSTS THAT MAY BE ESCALATING, UNFORTUNATELY, BUT



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1 OBVIOUSLY THAT IS GOING ON IN ALL OF OUR HEALTHCARE CAMPUSES.  
2 SO WHAT I WANT TO HAVE A BETTER UNDERSTANDING, THIS IS THE  
3 BEGINNING AND A PRELIMINARY REPORT, FOR THE MOST PART,  
4 CORRECT?

5

6 **DR. THOMAS GARTHWAITE:** YES.

7

8 **SUP. MOLINA, CHAIR:** YOU ARE GOING TO BE ENGAGING A CONSULTANT,  
9 I UNDERSTAND, WHO IS GOING TO BE DOING A MORE COMPREHENSIVE  
10 ANALYSIS, IS THAT CORRECT?

11

12 **DR. THOMAS GARTHWAITE:** YES.

13

14 **SUP. MOLINA, CHAIR:** ALL RIGHT. AND SO ARE THEY GOING TO DO ALL  
15 OF-- ALL OF THE COMPREHENSIVE PLANNING AND EVERYTHING THAT  
16 WE'RE GOING TO NEED IN ORDER TO GET A BETTER UNDERSTANDING OF  
17 THIS ASSESSMENT AND EVALUATION?

18

19 **DR. THOMAS GARTHWAITE:** SURE, YES, AND PRIORITIZATION.

20

21 **SUP. MOLINA, CHAIR:** ALL RIGHT. AND, OF COURSE, NOW THAT WE  
22 SORT OF KNOW WHERE WE ARE ON OUR WHOLE MEDI-CAL REDESIGN AND--  
23 ARE WE GOING TO BRING BACK A KIND OF A-- AFTER THIS CONSULTANT  
24 REPORT, SOME KIND OF A COMPREHENSIVE APPROACH AS TO HOW WE'RE  
25 GOING TO ADDRESS THESE ISSUES, MEANING HOW ARE WE GOING TO



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1 FINANCE THEM, HOW ARE WE GOING TO PAY FOR THEM, AND MAYBE THE  
2 MORE URGENT TO THE LEAST URGENT?

3

4 **DR. THOMAS GARTHWAITE:** YEAH. I ACTUALLY THINK THAT'S THE GOAL.  
5 THAT IS THE GOAL, TO PRIORITIZE, TO DEFINE AND PRESENT.

6

7 **SUP. MOLINA, CHAIR:** ALL RIGHT.

8

9 **SUP. BURKE:** COULD WE JUST ASK HIM TO REVIEW THE HUMPHREY  
10 FACILITIES, ALSO, JUST TO...

11

12 **SUP. MOLINA, CHAIR:** WELL, THAT'S WHY I'M SAYING, IF THEY  
13 ENGAGE A CONSULTANT, HOPEFULLY IT'S GOING TO BE A  
14 COMPREHENSIVE REVIEW, NOT JUST THE ONES THEY'VE OUTLINED BUT  
15 TO LOOK AT EACH CAMPUS, TO LOOK AT EACH CAMPUS AND HOPEFULLY  
16 DO AN ASSESSMENT OF WHERE WE ARE AND THEN THAT, WITHIN THAT  
17 FRAMEWORK, THAT'S WHY I'VE ASKED THE QUESTION AND, MR.  
18 JANSSEN, IF YOU COULD HELP AS WELL, IS THE IDEA, THEN, IT WILL  
19 COME BACK AS WELL WITH SOME KIND OF PATHWAY AS TO HOW WE'RE  
20 GOING TO FUND IT IN LIGHT OF THE DEFICIT IN THE DEPARTMENT?

21

22 **C.A.O. JANSSEN:** RIGHT. I MEAN, THAT'S THE CHALLENGE,  
23 OBVIOUSLY.

24



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1   **SUP. MOLINA, CHAIR:** AND THEN ALSO THE PRIORITY, LIKE, YOU  
2   KNOW, ACCREDITATION ISSUES FIRST, OBVIOUSLY, OR SAFETY ISSUES  
3   FIRST BUT I DON'T KNOW, THAT'S WHAT I WANT TO CLARIFY, WHAT IS  
4   IT THAT WE'RE GOING TO GET BACK. BUT I APPRECIATE THIS REPORT  
5   AS IT WAS BROUGHT IN BUT IT DOESN'T LIMIT IT TO JUST WHAT THEY  
6   POINTED OUT AT THIS POINT IN TIME, MS. BURKE. MR. YAROSLAVSKY.

7

8   **SUP. YAROSLAVSKY:** CAN I ASK, ARE YOU GOING TO HIRE TWO  
9   DIFFERENT CONSULTANTS? ONE TO DO THE-- WHAT IS THE CONSULTANT  
10   YOU JUST MADE REFERENCE TO THAT YOU'RE GOING TO HIRE? TO  
11   ASSIST YOU WITH A COUNTYWIDE CAPITAL FACILITIES PLAN?

12

13   **DR. THOMAS GARTHWAITE:** I THINK-- MY UNDERSTANDING IS THAT TO  
14   WORK WITH THE C.A.O. TO DO AN OVERVIEW OF THE...

15

16   **C.A.O. JANSSEN:** YEAH. WE'LL BE BACK IN NOVEMBER, I UNDERSTAND  
17   NOW, WITH A MORE COMPREHENSIVE EVALUATION.

18

19   **SUP. YAROSLAVSKY:** WHAT WILL BE BACK IN NOVEMBER? WHY DON'T YOU  
20   JUST HAVE THEM COME UP INSTEAD OF GOING THROUGH THE MIDDLEMAN  
21   HERE. I MEAN, NO OFFENSE.

22

23   **C.A.O. JANSSEN:** YEAH, NO, I AGREE. I DON'T SEE JAN HERE.

24

25   **SUP. YAROSLAVSKY:** OH, OKAY.



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1

2 **SUP. MOLINA, CHAIR:** BUT MR. JANSSEN...

3

4 **SUP. YAROSLAVSKY:** CAN WE HOLD...

5

6 **SUP. MOLINA, CHAIR:** MR. JANSSEN...

7

8 **SUP. YAROSLAVSKY:** CAN WE HOLD THIS UNTIL HE GETS HERE?

9

10 **SUP. MOLINA, CHAIR:** MR. JANSSEN...

11

12 **C.A.O. JANSSEN:** YEAH, WE CAN DO THAT.

13

14 **SUP. MOLINA, CHAIR:** DID I-- IS IT NOT WHAT I JUST SAID? I  
15 THOUGHT THAT...

16

17 **C.A.O. JANSSEN:** NO, I BELIEVE IT IS. THE QUESTION IS ABOUT  
18 THIS CONSULTANT AND WHAT THEY'RE GOING TO DO AND I THINK  
19 THAT'S A FAIR QUESTION THAT NEEDS TO BE ANSWERED.

20

21 **SUP. YAROSLAVSKY:** WELL, I THOUGHT WHAT I HEARD, I DON'T KNOW  
22 WHETHER IT WAS YOU OR DR. GARTHWAITE, BUT SOMEBODY SAID  
23 THERE'S A CONSULTANT THAT'S GOING TO BE HIRED TO ASSIST IN THE  
24 CAPITAL-- THE COUNTYWIDE CAPITAL PLAN AND THEN I'M READING THE  
25 REPORT AND IT SAYS THAT "THERE'S GOING TO BE A CONSULTANT



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1 HIRED TO MASTER PLAN THE L.A. COUNTY U.S.C. CAMPUS AS PART OF  
2 THE PLANNING ASSOCIATED WITH THE 2007 OPENING OF THE L.A.  
3 COUNTY U.S.C. MEDICAL CENTER REPLACEMENT HOSPITAL, THE  
4 DEPARTMENT HAS ENGAGED AN OUTSIDE CONSULTANT TO DEVELOP A  
5 CAMPUS MASTER PLAN FOR THIS FACILITY. THE INITIATION OF THE  
6 MASTER PLAN, THE ACTIVITIES FOR THE REST OF D.H.S. MEDICAL  
7 CAMPUSES WILL BE INITIATED IN CONSULTATION WITH THE C.A.O.  
8 UPON THE DEVELOPMENT OF THE STRATEGIC PLAN RECOMMENDATIONS  
9 DISCUSSED ABOVE." SO YOU'VE ALREADY HIRED A CONSULTANT TO  
10 MASTER PLAN THE COUNTY U.S.C....

11

12 **DR. THOMAS GARTHWAITE:** WE HAVE NOT.

13

14 **SUP. YAROSLAVSKY:** WELL, IS THIS YOUR REPORT? IT'S FROM DR.  
15 GARTHWAITE. PAGE 2, SECOND PARAGRAPH.

16

17 **DR. THOMAS GARTHWAITE:** WELL, I DON'T...

18

19 **SUP. YAROSLAVSKY:** "AS PART OF THE PLANNING ASSOCIATED, THE  
20 DEPARTMENT HAS ENGAGED AN OUTSIDE CONSULTANT." YOU LOOK GOOD  
21 IN THAT SEAT, JAN. [ LAUGHTER ]

22

23 **JAN TAKATA:** THERE IS A MASTER PLAN ENGAGED FOR THE MEDICAL  
24 CENTER. FOR THE OTHER FACILITIES, WE'LL BE REPORTING ON A PLAN  
25 TO ENGAGE PLANNERS FOR THE OTHER SITES IN ABOUT 30 DAYS.





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1

2 **SUP. YAROSLAVSKY:** YOU'RE GOING TO ENGAGE ONE PLANNER FOR ALL  
3 THE OTHER SITES OR A PLANNER PER SITE?

4

5 **JAN TAKATA:** A PLANNER PER SITE.

6

7 **SUP. YAROSLAVSKY:** WHEN DID THE COUNTY ENGAGE A CONSULTANT ON  
8 COUNTY U.S.C.?

9

10 **JAN TAKATA:** THAT WAS-- THE DEPARTMENT DID THAT ABOUT 3, 4  
11 MONTHS AGO.

12

13 **DR. THOMAS GARTHWAITE:** DID I SIGN THAT?

14

15 **SUP. YAROSLAVSKY:** PARDON?

16

17 **DR. THOMAS GARTHWAITE:** DID I SIGN THAT?

18

19 **JAN TAKATA:** IT'S BEEN A FEW MONTHS.

20

21 **SUP. YAROSLAVSKY:** HE DOESN'T KNOW ABOUT IT.

22

23 **DR. THOMAS GARTHWAITE:** I JUST DON'T REMEMBER IT. I DON'T  
24 REMEMBER SIGNING THIS. I'LL CHECK. IT'S POSSIBLE. BUT I'LL  
25 CHECK.



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1

2 **SUP. YAROSLAVSKY:** AND HOW DOES THAT INTEGRATE INTO THIS?

3

4 **JAN TAKATA:** THAT WAS DONE SEPARATELY. WE'RE GOING TO NOW TAKE  
5 THAT EXPANDING APPROACH FOR THE ENTIRE HEALTH SYSTEM, BASED ON  
6 SUPERVISOR MOLINA'S MOTION AND LOOKING AT EACH SITE, IN THE  
7 SAME MANNER WE'RE LOOKING AT THE AT THE MEDICAL CENTER,  
8 L.A.C./U.S.C. MEDICAL CENTER SITE.

9

10 **SUP. YAROSLAVSKY:** ARE THEY ALL GOING TO BE FOLDED INTO ONE  
11 REPORT NOW? THE REASON TO DO THIS WAS TO KIND OF  
12 COMPREHENSIVELY NOT HAVE...

13

14 **JAN TAKATA:** CORRECT.

15

16 **SUP. YAROSLAVSKY:** ... ONE THING POP UP AT KING AND ANOTHER POP  
17 UP AT OLIVE VIEW AND ANOTHER POP UP AT COUNTY U.S.C. BUT TO  
18 PUT IT ALL TOGETHER. ARE WE NOW GOING TO MERGE THESE 2-- OR  
19 THESE SEVERAL CONSULTANT STUDIES?

20

21 **JAN TAKATA:** WE'LL BE APPROACHED-- THERE WILL BE A NUMBER OF  
22 STUDIES BUT THEY'LL BE COORDINATED AND PRESENTED TO THE BOARD  
23 AS A COMPREHENSIVE PACKAGE OF THE ENTIRE SYSTEM.

24

25 **SUP. ANTONOVICH:** AND WHO'S GOING TO COORDINATE THEM?



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1

2 **JAN TAKATA:** WE'LL BE COORDINATING WITH THE DEPARTMENT.

3

4 **SUP. YAROSLAVSKY:** THE DEPARTMENT DOESN'T EVEN KNOW THEY'VE  
5 HIRED A CONSULTANT YET. SO I HOPE...

6

7 **DR. THOMAS GARTHWAITE:** OTHERS MAY KNOW. I JUST DON'T REMEMBER  
8 SIGNING THAT CONTRACT.

9

10 **SUP. YAROSLAVSKY:** I APPRECIATE THAT.

11

12 **DR. THOMAS GARTHWAITE:** I DON'T REMEMBER SIGNING THAT CONTRACT.

13

14 **SUP. YAROSLAVSKY:** BUT I WOULD THINK THAT THAT WOULD BE A  
15 PRETTY BIG CONTRACT FOR THAT PARTICULAR SITE. WHAT ARE THE  
16 THINGS THAT-- WHAT ARE THE KINDS OF THINGS YOU'RE GOING TO BE  
17 LOOKING AT AT THE VARIOUS SITES, INCLUDING THE U.S.C. SITE?

18

19 **JAN TAKATA:** WELL, OUR CONCERN HAS BEEN HOW DO WE PROPERLY  
20 ALIGN THE CAPITAL NEEDS WITH THE OPERATIONAL NEEDS. THE  
21 OPERATIONAL NEEDS ARE DEPENDENT ON THE-- SOMEWHAT ON THE  
22 FISCAL SITUATION THAT HAS BEEN IN FLUX, SO WE WANT TO MAINTAIN  
23 THAT ALIGNMENT, COME UP WITH A PLAN THAT MEETS THE OPERATIONAL  
24 AND FUNCTIONAL NEEDS AND LOOK AT HOW TO BEST PLACE THAT ON THE  
25 CAMPUS AND WITHIN THE EXISTING BUILDINGS OR IF WE NEED NEW



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1 CONSTRUCTION TO MAKE IT ALL WORK. THAT'S WHAT THE SITE  
2 PLANNERS THAT WE'LL BE ENGAGING WILL BE...

3

4 **SUP. YAROSLAVSKY:** SO GIVE ME AN EXAMPLE AT OLIVE VIEW. HOW  
5 WILL THAT-- WHAT ARE THE THINGS YOU'LL BE LOOKING AT AT OLIVE  
6 VIEW?

7

8 **JAN TAKATA:** WELL, OLIVE VIEW IS AN INTERESTING SITUATION  
9 BECAUSE WE HAVE SO MUCH GOING ON. WE'VE GOT 1953 SEISMIC  
10 RETROFIT NEEDS, WE HAVE THE EMERGENCY ROOM THAT WE'RE  
11 STUDYING, EXPANSION, THE ISOLATION UNIT. ONCE WE-- IF THAT  
12 GOES FORWARD, IF THE BOARD APPROVES THAT, THEN WE HAVE TO  
13 ADDRESS THE PSYCH E.R. SPACE, HOW DO WE MAKE THAT FIT? DO WE  
14 EXPAND IT, DO WE MOVE IT INTO THE EXIST EMERGENCY ROOM SPACE?  
15 THERE'S A LOT OF SPACE PLANNING QUESTIONS THAT NEED TO BE  
16 ADDRESSED AND LINKED WITH THE OPERATIONAL REQUIREMENTS.

17

18 **SUP. YAROSLAVSKY:** AND WHAT WILL YOU BE DOING AT THE OTHER  
19 SITES, AT HARBOR-U.C.L.A.? KING, I THINK WE KNOW. WE DISCUSSED  
20 THAT A COUPLE WEEKS AGO.

21

22 **JAN TAKATA:** WELL, HARBOR, WE HAVE THE SURGERY EMERGENCY  
23 BUILDING THAT IS NEARING COMPLETION ON DESIGN. THAT WILL PLACE  
24 CERTAIN REQUIREMENTS IN TERMS OF MOVING THEM FROM THE  
25 INPATIENT TOWER, HOW DO WE RECONFIGURE THE INPATIENT TOWER TO



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1 MAXIMIZE EFFICIENCIES. WE HAVE SIMILAR PROBLEMS IN TERMS OF  
2 SPACE AT HARBOR. SPACE IS A CRITICAL ISSUE AT HARBOR. THERE'S  
3 JUST NOT ENOUGH SPACE. SO HOW DO WE ADDRESS THAT, GIVEN THE  
4 NEW BUILDING AND ANYTHING ELSE THE BOARD PLACES AS A PRIORITY?  
5 WE NEED A PLANNER TO HELP COORDINATE THAT AT THAT SITE.

6

7 **SUP. YAROSLAVSKY:** WHAT ARE YOU LOOKING AT-- WHAT IS A  
8 CONSULTANT LOOKING AT AT COUNTY U.S.C., THE SEPARATE  
9 CONSULTANT?

10

11 **JAN TAKATA:** THEY ARE LOOKING AT POTENTIAL USES. ONCE THE MED  
12 CENTER REPLACEMENT PROJECT IS COMPLETED, HOW DO WE VIEW THE  
13 SITE, WHERE DO WE MOVE WITHIN THE SITE, AND HOW DO WE DEVELOP  
14 THAT SITE?

15

16 **SUP. YAROSLAVSKY:** WHEN YOU SAY, "THE SITE," YOU MEAN THE  
17 PROPERTY, THE CAMPUS?

18

19 **JAN TAKATA:** PROPERTY, THE WHOLE CAMPUS.

20

21 **SUP. YAROSLAVSKY:** WHAT IS THE PLAN FOR THE OLD BUILDING AT  
22 THIS POINT?

23

24 **JAN TAKATA:** I CAN'T ANSWER THAT RIGHT NOW, SUPERVISOR.

25



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1    **SUP. YAROSLAVSKY:** WHATEVER THE OPTIONS?

2

3    **JAN TAKATA:** I'D HAVE TO LOOK. WE COULD REPORT BACK TO YOU VERY  
4    QUICKLY ON THAT. I DON'T HAVE THAT OFF THE TOP OF MY HEAD.

5

6    **SUP. YAROSLAVSKY:** SO ALL OF THE OTHER SITES APPEAR TO ME TO BE  
7    RELATED TO THE MAIN FACILITY ITSELF, SURGERY AT HARBOR,  
8    EMERGENCY ROOMS AT OLIVE VIEW, UPGRADES AT KING IN THE  
9    FACILITY. THAT'S NOT THE CASE AT COUNTY U.S.C., IS IT? WE'RE  
10   GOING TO ENTER INTO A BRAND NEW FACILITY IN A YEAR AND A HALF  
11   OR SO.

12

13   **JAN TAKATA:** THEY'LL BE ENTERING INTO A BRAND NEW FACILITY.  
14   THAT FACILITY WILL NOT HOLD ALL THE FUNCTIONS CURRENTLY AT THE  
15   SITE SO WE'RE GOING TO HAVE TO DO SOMETHING AT THE SITE TO  
16   ACCOMMODATE THEM.

17

18   **SUP. YAROSLAVSKY:** SUCH AS?

19

20   **JAN TAKATA:** I'D HAVE TO GET BACK TO YOU ON THAT. I'M NOT  
21   PERSONALLY FAMILIAR WITH-- THOROUGHLY WITH THE MED CENTER  
22   SITE.

23



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1   **SUP. YAROSLAVSKY:** I'M NOT-- I JUST-- DO YOU KNOW THE ANSWER TO  
2   THAT QUESTION? WHAT ARE THE THINGS THAT DON'T FIT INTO THE NEW  
3   SITE? EVERYBODY TAKE YOUR TURN, BEING DAVID JANSSEN HERE.

4

5   **SPEAKER:** THERE ARE A NUMBER OF FUNCTIONS WITHIN THE HOSPITAL  
6   RIGHT NOW THAT WILL NOT FIT. MOST OF IT PRIMARILY IS OFFICE,  
7   PHYSICIAN OFFICE, STAFF OFFICE SPACE. CLINICALLY, OBVIOUSLY,  
8   WE HAVE TO SIZE DOWN FROM THE CURRENT SIZE TO THE NEW FACILITY  
9   IN ACCORDANCE WITH THE SETTLEMENT AGREEMENT BUT THERE IS, FOR  
10   EXAMPLE, THE INDIGENT MORGUE FOR ALL THE JOHN DOE BODIES ARE  
11   KEPT IN THE MED CENTER. THERE'S NOT SPACE IN THE NEW HOSPITAL  
12   FOR THOSE, SO WE'RE GOING TO HAVE TO FIND A LOCATION FOR A NEW  
13   MORGUE FOR THE INDIGENT BODIES. STAFF FOR PATIENT FINANCIAL  
14   SERVICE WORKERS, THERE'S MORE THAN THAT WOULD FIT IN THE  
15   CURRENT HOSPITAL, DOCTOR'S OFFICES AND SO FORTH.

16

17   **SUP. YAROSLAVSKY:** DO DOCTORS CURRENTLY OFFICE IN THE GENERAL  
18   HOSPITAL SITE?

19

20   **SPEAKER:** YEAH. GENERAL HOSPITAL IS ENORMOUS SO THERE ARE A LOT  
21   OF PHYSICIAN OFFICES IN THERE. THERE ARE PHYSICIAN OFFICES IN  
22   THERE WHERE THE DOCTOR PROBABLY HASN'T WALKED IN THE HOSPITAL  
23   FOR MANY YEARS, SO THEY'RE GOING THROUGH A PROCESS OF LOOKING  
24   AT WHO IS IN THE BUILDING NOW, WHO IS USING THE BUILDING NOW,  
25   WHO ACTUALLY COMES EVERY DAY. SO THERE'S THAT PART OF THE





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1 HOSPITAL'S PLANNING PROCESS IN TERMS OF DOING THE TRANSITION  
2 PLANNING FROM THE CURRENT FACILITY TO THE NEW FACILITY.

3

4 **SUP. YAROSLAVSKY:** DO YOU HAVE ANY IDEA WHAT THE OPTIONS ARE  
5 CURRENTLY FOR THE OLD GENERAL HOSPITAL BUILDING ONCE IT'S  
6 VACATED?

7

8 **SPEAKER:** THAT'S PART OF THE PLANNING PROCESS WHEN WE ENGAGED  
9 THE OUTSIDE CONSULTANT TO ASSIST US WITH CAPITAL-- FOR THE  
10 CAMPUS PLANNING. THEY'RE LOOKING REUSE OPPORTUNITIES FOR THE  
11 GENERAL HOSPITAL, FOR WOMEN AND CHILDREN'S. THAT'S PART OF THE  
12 PLANNING PROCESS WHICH JUST BEGAN, I THINK, THE CONSULTANT  
13 CAME ON BOARD IN JULY OR AUGUST SO WE'RE NOT QUITE THROUGH  
14 THAT PROCESS TO HAVE IDENTIFIED SPECIFIC RECOMMENDATIONS FOR  
15 THAT SPACE.

16

17 **SUP. YAROSLAVSKY:** IS THERE ANY CONSIDERATION BEING GIVEN TO  
18 TEARING IT DOWN? DEMOLISHING IT?

19

20 **SPEAKER:** I BELIEVE THAT THE GENERAL HOSPITAL IS A HISTORIC  
21 LANDMARK AND IS DESIGNATED AS SUCH AND CANNOT BE TORN DOWN.

22

23 **SUP. YAROSLAVSKY:** YES, IT IS.

24

25 **SUP. BURKE:** NO, IT'S NOT. IT'S NOT HISTORICAL HISTORICAL.



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1

2 **SPEAKER:** BUT I THINK THERE IS-- OH, IT'S NOT YET?

3

4 **SUP. BURKE:** IT'S NOT HISTORICAL.

5

6 **SPEAKER:** OKAY. WELL, I DON'T KNOW WHEN-- IT'S NOT  
7 DESIGNATED...

8

9 **SUP. BURKE:** IT'S NOT ON A LIST.

10

11 **SPEAKER:** ...BUT I KNOW THAT IT'S...

12

13 **SUP. BURKE:** IT'S NOT ON A LIST BUT IT WILL BE IF WE KEEP  
14 WAITING.

15

16 **SPEAKER:** SO NO, THEY'VE NOT IDENTIFIED ANYTHING SPECIFIC FOR  
17 THE OLD HOSPITAL. ONE OF THE ISSUES WITH THE OLD BUILDING IS,  
18 BECAUSE IT IS SO OLD AND IT'S NOT UP TO DATE IN TERMS OF  
19 WIRING AND AIR CONDITIONING AND SO FORTH, IS YOU WOULD LOSE, I  
20 BELIEVE, EVERY THIRD FLOOR IF YOU WERE TO DO A RENOVATION.

21

22 **SUP. YAROSLAVSKY:** CAN I ASK MR. JANSSEN TO COME BACK FOR A  
23 SECOND?

24



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1   **SUP. BURKE:** MR. YAROSLAVSKY, COULD I MAKE JUST ONE LITTLE  
2   COMMENT? AS THEY HAVE THE PLANNER, COULD HE ALSO LOOK AT THE  
3   ALTERNATIVES OF HOW YOU WOULD REMOVE THE BUILDING. I KNOW THAT  
4   IT'S BEEN THERE FOR MANY, MANY YEARS, I KNOW IT'S CONCRETE OR  
5   WHATEVER, STONE AND CONCRETE. IT CAN'T BE IMPOLODED, I  
6   UNDERSTAND, IMPOLODED, BECAUSE OF ITS PROXIMITY TO OTHER  
7   FACILITIES. THAT'S WHAT I WAS TOLD. BUT WITH NEW TECHNOLOGY...

8

9   **SUP. MOLINA, CHAIR:** WHICH BUILDING IS THAT?

10

11   **C.A.O. JANSSEN:** MED CENTER. THE OLD HOSPITAL.

12

13   **SUP. BURKE:** OLD MED CENTER, OLD HOSPITAL.

14

15   **C.A.O. JANSSEN:** WHAT TO DO WITH IT.

16

17   **SUP. BURKE:** RIGHT. BECAUSE IT'S TOO CLOSE. BUT, WITH NEW  
18   TECHNOLOGY, IT SEEMS TO ME THERE SHOULD BE SOME MECHANISM OF  
19   WHERE IT COULD BE DISMANTLED BECAUSE THE LAND ITSELF IS  
20   PROBABLY WORTH AS MUCH AS IT WILL COST TO DISMANTLE IT.

21

22   **SUP. YAROSLAVSKY:** JUST-- MY LAST QUESTIONS TO YOU WAS, WHEN  
23   THIS REPORT COMES OUT-- WHEN THIS REPORT COMES OUT, AM I  
24   CORRECT IN UNDERSTANDING THAT ALL OF THESE SITES, INCLUDING



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1 THE CONSULTANT THAT IS NOW WORKING ON COUNTY U.S.C., IT'S ALL  
2 GOING TO BE FOLDED INTO ONE COMPREHENSIVE REPORT?

3

4 **C.A.O. JANSSEN:** YES, THAT'S CORRECT, SUPERVISOR, AND I  
5 UNDERSTAND FROM JAN IT WILL TAKE ABOUT A YEAR TO DO ALL OF THE  
6 WORK AND COME BACK WITH A REPORT.

7

8 **SUP. YAROSLAVSKY:** THANK YOU.

9

10 **SUP. MOLINA, CHAIR:** ALL RIGHT. THIS IS A RECEIVE AND FILE  
11 ITEM. THANK YOU SO MUCH, DR. GARTHWAITE. WE WILL RECEIVE AND  
12 FILE THAT ITEM.

13

14 **SUP. ANTONOVICH:** THEN THIS-- I HAVE ANOTHER ADJOURNMENT, A  
15 GOOD FRIEND TO ALL OF US, A GOOD REPUBLICAN LEADER, ACTIVE  
16 FORMER CANDIDATE MAYOR EDWARD "CORKY" CORTEZ PASSED AWAY THIS  
17 MORNING. HE HAD SERVED AS MAYOR OF POMONA SINCE 1993, ACTIVE  
18 MEMBER ON THE ALAMEDA CORRIDOR EAST GOVERNING BOARD AMONG  
19 OTHER ORGANIZATIONS AND CHARITABLE GROUPS. ONE OF THE  
20 HIGHLIGHTS EARLIER THIS YEAR, WAS A DINNER HE HAD AT THE WHITE  
21 HOUSE WITH PRESIDENT BUSH WITH HE AND HIS WIFE, SALLY, AND WE  
22 JUST GIVE OUR PRAYERS TO SALLY AND THE FAMILY. HE WAS-- PUT UP  
23 A VERY VALIANT FIGHT.

24

25 **SUP. KNABE:** I WANT TO BE INCLUDED AS WELL.



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1

**SUP. MOLINA, CHAIR:** YES, I HAVE THE MOTION IN HERE. WE WERE INFORMED THIS MORNING. MAYOR CORTEZ SERVED AS MAYOR OF POMONA FOR OVER 12 YEARS AND HE WAS INVOLVED IN OTHER CIVIC LEADERSHIP ROLES BEFORE THAT, AS WELL AS SERVING ON THE POMONA PLANNING COMMISSION SIX YEARS BEFORE THAT, SO WE WANT TO HAVE ALL MEMBERS SEND CONDOLENCES TO HIS WIFE, SALLY, AS WELL AS HIS EIGHT CHILDREN AND HE DID-- IT WAS A VERY VALIANT FIGHT, AND UNFORTUNATELY WE LOST THEM THIS MORNING. SO ORDERED ON THAT ADJOURNMENT. ALL RIGHT. WHAT I'M GOING TO ASK AT THIS POINT IN TIME IS WE'RE GOING TO DEFER THE HEALTH DEPARTMENT BUDGET COMMITTEE REPORT UNTIL AFTER WE DO OUR BUDGET MATTERS. SO IF WE COULD ASK AT THIS TIME TO BEGIN THE BUDGET BUT, BEFORE I DO THAT, LET ME JUST MAKE SURE THAT WE'VE DONE ALL THE ADJOURNMENTS. THAT WAY, WE CAN GET THAT OUT OF THE WAY. I THINK MR. YAROSLAVSKY HAS A SPECIAL ADJOURNMENT.

17

**SUP. YAROSLAVSKY:** I HAVE TWO. ONE I WANTED TO PRESENT, MR. KNABE ALREADY MADE THE MOTION BUT I'LL CO-PRESENT IT, SIMON WIESENTHAL. I KNEW SIMON WIESENTHAL PERSONALLY, I HAD THE PRIVILEGE OF MEETING WITH HIM ON A NUMBER OF OCCASIONS THROUGH THE YEARS. EVERYTHING THAT HAS BEEN SAID ABOUT HIM IS TRUE AND ACCURATE HISTORICALLY. THE THING THAT I FOUND MOST NOTEWORTHY ABOUT HIM, OTHER THAN WHAT'S ALREADY BEEN WRITTEN, IS THE PURITY OF HIS SOUL, HIS INTEGRITY, HIS WILLINGNESS TO STAND UP



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1 TO ANYBODY, INCLUDING HIS FRIENDS, WHEN HIS FRIENDS WERE TIMID  
2 ABOUT PURSUING JUSTICE, TO WHICH HE DEDICATED THE LAST 60  
3 YEARS OF HIS LIFE, SO HE'S RIGHTLY KNOWN AS AN INTERNATIONAL  
4 FIGURE BUT HIS WORK WILL ALWAYS BE REVERED IN THE JEWISH  
5 COMMUNITY AND IN THE HUMAN RIGHTS COMMUNITY. IT'S A GREAT  
6 LOSS. ALSO, I'D LIKE TO ASK THAT WE ADJOURN IN THE MEMORY OF  
7 ROBERT WISE. BOB WISE, RENOWNED DIRECTOR, FILM DIRECTOR,  
8 CONSTITUENT OF MINE, AGAIN, SOMEONE I GOT TO KNOW AS A CITY  
9 COUNCILMAN AND DIRECTED FILMS SUCH AS "THE DAY THE EARTH STOOD  
10 STILL," "WEST SIDE STORY," "THE SOUND OF MUSIC," FOR WHICH HE  
11 WON AN ACADEMY AWARD, AS HE DID FOR "WEST SIDE STORY". "THE  
12 ANDROMEDA STRAIN" AND MANY OTHERS. HE WORKED WITH ORSON WELLS  
13 ON "CITIZEN KANE" AND "THE MAGNIFICENT AMBERSONS" AND A WHOLE  
14 LOT OF OTHER WELL KNOWN CLASSIC FILMS. ON A PERSONAL NOTE, WE  
15 KNEW HIM ALSO AS A DEVOTED UNCLE OF MY FORMER PRESS SECRETARY,  
16 KATHERINE MCDONALD, WHO PASSED AWAY A FEW YEARS AGO AND WHO  
17 HAD NO LIVING PARENTS OF HER OWN AND BOB WISE WAS HER DAD,  
18 FUNCTIONED AS HER DAD. HE IS SURVIVED BY HIS WONDERFUL WIFE,  
19 MILLICENT, A SON AND A DAUGHTER AND A GRANDDAUGHTER AND A REAL  
20 GIANT IN HOLLYWOOD HAS PASSED. THOSE ARE MY TWO ADJOURNMENTS.

21

22 **SUP. BURKE:** I'D LIKE TO JOIN IN.

23

24 **SUP. YAROSLAVSKY:** ALL MEMBERS.

25



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1    **SUP. ANTONOVICH:** ALL MEMBERS.

2

3    **SUP. MOLINA, CHAIR:** ALL RIGHT. SO ORDERED ON THOSE  
4    ADJOURNMENTS. NOW I LOST MY BUDGET PRESENTER. OH. MR. JANSSEN.  
5    WE'LL TURN IT OVER TO YOU TO-- ON THESE BUDGET ITEMS, WHICH  
6    ARE ITEMS 58 THROUGH 61.

7

8    **C.A.O. JANSSEN:** RIGHT. THANK YOU VERY MUCH, MADAM CHAIR, BOARD  
9    MEMBERS. THE FIRST THREE ITEMS ARE WHAT I WOULD CONSIDER  
10    ROUTINE. ITEM 58 IS A REQUEST BY THE AUDITOR-CONTROLLER TO  
11    MAKE FINAL BUDGET ADJUSTMENTS FOR LAST YEAR'S BUDGET,  
12    2004/2005. IT'S A 4-VOTE ITEM AND IT IS SIMPLY CLOSING THE  
13    BOOKS FROM LAST YEAR. I WOULD RECOMMEND APPROVAL OF THE ITEM.

14

15    **SUP. ANTONOVICH:** SECOND.

16

17    **SUP. MOLINA, CHAIR:** ALL RIGHT. MOVED. SECONDED. ANY QUESTION  
18    OR COMMENT? IF NOT, IF NO OBJECTION, SO ORDERED.

19

20    **C.A.O. JANSSEN:** OKAY. THANK YOU. ITEM 59 IS A SIMILAR  
21    ADJUSTMENT FOR THE HEALTH DEPARTMENT BUDGET FOR LAST YEAR,  
22    CLOSING THE BOOKS. A 4-VOTE ITEM ALSO. I WOULD RECOMMEND THAT  
23    YOU APPROVE ITEM 59.

24

25    **SUP. YAROSLAVSKY:** MOVE IT.





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1

2 **SUP. MOLINA, CHAIR:** MOVED. IS THERE A SECOND? MOVED AND  
3 SECONDED. ANY QUESTION OR COMMENT? IF NOT, SO ORDERED ON THAT  
4 ITEM.

5

6 **C.A.O. JANSSEN:** ALL RIGHT. ITEM 60 IS ALSO A TECHNICAL  
7 ADJUSTMENT BUT IT NOW IS DEALING WITH THE CURRENT FISCAL YEAR,  
8 2005/2006. IT RECOGNIZES THE ACTUAL FUND BALANCE FROM LAST  
9 YEAR VIS-A-VIS WHAT WE HAD ASSUMED IN THE BUDGET AND IT PLACES  
10 THE EXCESS DOLLARS INTO CONTINGENCY, WHICH WE WILL THEN, IN  
11 ITEM 61, TALK TO YOU ABOUT APPROPRIATING. SO THIS ACTION IS TO  
12 TAKE SEVERAL INDEPENDENT-- INDIVIDUAL ACTIONS BUT PRIMARILY TO  
13 PUT 164.464 MILLION DOLLARS INTO THE APPROPRIATION FOR  
14 CONTINGENCIES, WHICH IS THE AMOUNT OF ADDITIONAL FUND BALANCE  
15 THAT WE HAVE AVAILABLE THIS YEAR. SO I'D RECOMMEND APPROVAL OF  
16 THAT ITEM.

17

18 **SUP. YAROSLAVSKY:** MOVE IT.

19

20 **SUP. MOLINA, CHAIR:** ALL RIGHT. IT'S BEEN MOVED. IS THERE A  
21 SECOND? MS. BURKE SECONDS THAT ITEM. ANY OTHER DISCUSSION OR  
22 COMMENT ON ITEM 61? THIS IS, OF COURSE, THE LARGE ITEM, RIGHT,  
23 THAT HAS ALL THE...

24



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1   **C.A.O. JANSSEN:** RIGHT. ITEM 61, MADAM CHAIR, BOARD MEMBERS--  
2   DID THEY TAKE A VOTE ON THAT LAST ONE?

3

4   **SUP. MOLINA, CHAIR:** WE'VE JUST BEEN MOVED AND SECONDED. WE  
5   HAVEN'T MOVED ON IT YET.

6

7   **C.A.O. JANSSEN:** NO, THIS IS-- THAT WAS ITEM 60.

8

9   **SUP. MOLINA, CHAIR:** OH, I'M SORRY. I READ THE WRONG ONE.

10

11   **C.A.O. JANSSEN:** THAT WAS PUTTING THE MONEY INTO CONTINGENCY.

12

13   **SUP. MOLINA, CHAIR:** ITEM 60. OKAY. IT'S BEEN MOVED AND  
14   SECONDED, ITEM 60. ANY QUESTION OR COMMENT? IF NOT, SO ORDERED  
15   ON THAT ITEM. I APOLOGIZE. ITEM 61.

16

17   **C.A.O. JANSSEN:** OKAY. THANK YOU VERY MUCH. ALL RIGHT. THE  
18   GOVERNOR SIGNED THE STATE BUDGET JULY THE 10TH OF THIS YEAR.  
19   IT WAS THE EARLIEST APPROVAL BY THE STATE IN OVER 5 YEARS. IT  
20   FULLY FUNDED PROP 42, DID NOT INCLUDE ANY NEW TAXES, DID NOT  
21   INCLUDE ANY ADDITIONAL BORROWING AND IT STARTED REPAYMENT TO  
22   CITIES AND COUNTIES OF THE VEHICLE LICENSE FUNDS WHICH THE  
23   STATE USED LAST YEAR AS PART OF BALANCING THEIR BUDGET. LOS  
24   ANGELES COUNTY DID NOT RECEIVE ANY OF THOSE MONEYS BECAUSE WE  
25   SECURITIZED WHAT THE STATE OWED US BUT, IN TALKING TO THE



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1   TREASURER ABOUT HOW THAT WORKS OUT, BECAUSE THERE WAS A  
2   HAIRCUT FOR DOING THAT SECURITIZATION, IS THAT THE MONEY WILL  
3   GO INTO AN ACCOUNT, EARN INTEREST AND, BY THE TIME WE'RE DONE,  
4   WE WILL ACTUALLY COME OUT SLIGHTLY AHEAD, HAVING SECURITIZED,  
5   BEING ABLE TO PUT THE MONEY IN A INTEREST-EARNING ACCOUNT. SO,  
6   FROM THAT STANDPOINT, IT WORKED OUT VERY WELL AND THE STATE  
7   DID FUND HALF OF ITS OBLIGATION A YEAR EARLY, SO THAT WAS VERY  
8   GOOD. THE DIFFICULT PART, OBVIOUSLY, WITH THE STATE IS THEY  
9   CONTINUE TO HAVE A SUBSTANTIAL DEFICIT PROJECTED IN '06/'07, I  
10   THINK IT'S SOMETHING IN THE NEIGHBORHOOD OF 6 TO \$7 BILLION  
11   THAT THEY CONTINUE TO BE SHORT IN THEIR BUDGET. THE ONE ITEM  
12   THAT WE DID LOSE IN THE BUDGET DISCUSSION WAS THE PROPERTY TAX  
13   ADMINISTRATION PROGRAM. IT'S ONE THAT GOES BACK MANY YEARS IN  
14   COUNTY LIFE. THE STATE FUNDED THE ASSESSOR'S OFFICE STAFF TO  
15   INCREASE, HELP INCREASE THE PROPERTY TAX RECEIPTS BECAUSE IT  
16   PRIMARILY ADVANTAGED THE SCHOOLS. IT WAS THE \$60 MILLION STATE  
17   GENERAL FUND PROGRAM THAT WAS ELIMINATED FROM THE BUDGET AND  
18   WE DID SET ASIDE \$10 MILLION IN OUR PROPOSED BUDGET FOR THE  
19   IMPACT TO THE STATE BUDGET AND WE'LL BE COMING BACK TO YOU  
20   SHORTLY AND ASK THAT THAT MONEY BE ALLOCATED TO THE ASSESSOR'S  
21   OFFICE SO THAT THEY CAN CONTINUE TO PROVIDE THAT LEVEL OF  
22   SERVICE. IT'S KIND OF A DIFFICULT SITUATION BECAUSE, ONCE WE  
23   DO IT, WE WILL HAVE PROVEN TO THE STATE THAT WE CAN DO IT  
24   WITHOUT THEIR MONEY, SO IT'S GOING TO BE A TOUGH ROAD GETTING  
25   IT BACK. ON THE OTHER HAND, BECAUSE OF PROPOSITION 1-A AND THE



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1 STATE DECISION TO TRANSFER ADDITIONAL PROPERTY TAX IN LIEU OF  
2 STATE GENERAL FUND, WE DO HAVE A GREATER STAKE IN PROPERTY TAX  
3 COLLECTION THAN WE DID JUST A YEAR AGO IN THE COUNTY. SO, OF  
4 THE 161.5 MILLION THAT IS IN CONTINGENCY, 23.4 MILLION OF THAT  
5 IS CONSIDERED CARRYOVER ITEMS. THOSE ARE IDENTIFIED IN THE  
6 BUDGET, CAPITAL PROJECTS, EXTRAORDINARY MAINTENANCE, CHILDREN  
7 AND FAMILY SERVICES HAS COSTS THAT ARE BEING CARRIED OVER,  
8 MUSEUM FUNDING AGREEMENTS, ET CETERA. THAT PART OF THIS ACTION  
9 IS A VERY TECHNICAL ITEM. SO, WHEN YOU TALK ABOUT HOW MUCH  
10 FUND BALANCE DO YOU HAVE THAT'S IN EXCESS OF PRIOR YEAR, IT'S  
11 \$138.1 MILLION. OUR FUND BALANCE IS ABOUT \$30 MILLION HIGHER  
12 THAN IT WAS LAST YEAR OVERALL, SO OUR FISCAL CONDITION  
13 CONTINUES OVERALL TO BE REASONABLY HEALTHY. OUR  
14 RECOMMENDATIONS FOR THE USE OF THAT \$138.1 MILLION.  
15 CONSISTENTLY, WE HAVE RECOMMENDED AND YOU HAVE SUPPORTED  
16 INVESTMENT IN CAPITAL PROJECTS, MAJOR MAINTENANCE,  
17 INFRASTRUCTURE, SINCE WE'RE TALKING PRIMARILY ABOUT ONE-TIME  
18 REVENUES WHEN YOU TALK ABOUT FUND BALANCE. THE PROPOSAL BEFORE  
19 YOU IS TO ALLOCATE \$104.9 MILLION OF THAT INTO CAPITAL  
20 PROJECTS, MAJOR MAINTENANCE AREAS, PROJECTS THAT CAN BE  
21 DETERMINED THROUGHOUT THIS FISCAL YEAR BUT, AGAIN, AS YOU JUST  
22 SAW IN THE HEALTH DEPARTMENT, FOR EXAMPLE, THEY HAVE THREE-  
23 QUARTERS OF A BILLION DOLLARS OF PROJECTS THAT THEY'VE  
24 IDENTIFIED AS A NEED. WE HAVE THAT THROUGHOUT THE COUNTY.  
25 WE'RE ALSO RECOMMENDING THAT THE MENTAL HEALTH DEPARTMENT



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1 CONTINUES TO HAVE A STRUCTURAL PROBLEM IN ITS BUDGET,  
2 SOMETHING WE TALKED ABOUT IN JUNE. THEY ALSO, OF COURSE, ARE  
3 GOING TO BE RECEIVING, FROM PROP 63, ALMOST \$275 MILLION ONCE  
4 IT GETS FULLY INTO PLACE. SO WE'RE RECOMMENDING THAT \$10  
5 MILLION OF GENERAL FUND AND 3.9 MILLION OF OTHER FUNDS BE  
6 ADDED TO THE MENTAL HEALTH DEPARTMENT AS A PATCH FOR THE  
7 CURRENT YEAR SO THAT THEY ARE NOT CUTTING AND THEN RESTORING  
8 SERVICES. PROP 63 DOES NOT ALLOW SUPPLANTATION OF GENERAL FUND  
9 MONEYS BUT WE UNDERSTAND THAT THEY ARE DEVELOPING DIFFERENT  
10 PROJECTS THAT WOULD PROVIDE SIMILAR BENEFITS TO PROGRAMS THAT  
11 THEY'RE NOW PROVIDING AND SO WE DON'T WANT TO BE MAKING CUTS  
12 AND THEN RESTORATIONS, SO THAT'S A LARGE PART OF THE  
13 APPROPRIATION. WE'RE ALSO RECOMMENDING THAT YOU SET ASIDE \$10  
14 MILLION RELATED TO KATRINA/HOMELESS ISSUES IN THE BUDGET. WE  
15 HAVE, I THINK THE LAST FIGURE WAS ALMOST 4,000 EVACUEES OR  
16 PEOPLE FROM THE GULF STATES ARE IN LOS ANGELES NOW, RECEIVING  
17 SERVICES OF ONE KIND OR ANOTHER. WE DON'T KNOW WHAT F.E.M.A.  
18 REIMBURSEMENT IS GOING TO BE BY THE TIME WE'RE DONE. WE'VE  
19 RECEIVED A NOTIFICATION FROM F.E.M.A. THIS MORNING THAT WE MAY  
20 RECEIVE EVACUEES IF THE CURRENT HURRICANE HAS A NEGATIVE  
21 IMPACT ON THE GULF STATES, SO THAT CONTINUES TO BE A VERY LIVE  
22 ISSUE AND WILL CONTINUE TO BE SO I THINK AS LONG AS THE  
23 HURRICANE SEASON IS PRESENT IN THE GULF STATES. INFORMATION  
24 TECHNOLOGY, ANOTHER AREA OVER THE YEARS THAT YOUR BOARD HAS  
25 ALLOCATED I WOULD SAY UPWARDS OF \$50 MILLION TO BRING THE



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1 COUNTY UP TO STATE OF THE ART IN TECHNOLOGY IN A LOT OF  
2 DIFFERENT AREAS. WE'RE SPECIFICALLY ADDING MONEY INTO DEFENSE  
3 OFFICES, ALTERNATE PUBLIC DEFENDER BECAUSE THEY HAVE-- THEY'RE  
4 FARTHER BEHIND THAN OTHER AGENCIES IN THAT AREA AND THEIR  
5 MONEY'S BEEN TIGHT IN THEIR DEPARTMENTS. ALSO, 4.4 MILLION  
6 SPECIFICALLY TO PURCHASE TECHNOLOGY AS A WHOLE BUT ALSO HOST  
7 INTRUSION PREVENTION SOFTWARE. WE ARE, WITHOUT A DOUBT,  
8 CAPTURED BY TECHNOLOGY. I DON'T KNOW THAT THERE'S ANY BETTER  
9 WORD FOR IT. WE ARE CAPTURED BY TECHNOLOGY. ONE COLLAPSE OF  
10 THE INTERNET LITERALLY CAN SHUT DOWN AN ENTIRE ORGANIZATION.  
11 AND THE COUNTY'S NETWORK BEING LARGELY A HOLISTIC NETWORK, THE  
12 WEAKEST LINK CAN CAUSE PROBLEMS WITH THE ENTIRE SYSTEM. SO WE  
13 NEED TO INVEST WHATEVER IS NECESSARY IN THAT AREA TO ALLOW US  
14 TO IDENTIFY WORMS AND DEAL WITH THEM WHEN WE FIND THEM.  
15 ADDITIONAL \$3 MILLION TO QUALITY AND PRODUCTIVITY COMMISSION.  
16 THEY CONTINUE TO BE A TREMENDOUS ASSET TO THE ORGANIZATION AND  
17 THE PROJECTS AND PROPOSALS THAT THEY SUPPORT WITH DEPARTMENTS.  
18 EVEN THOUGH WE HAVE OTHER-- HAVE HAD OTHER MONEY AVAILABLE IN  
19 THE BUDGET, THEY BRING OUT THE BEST IN MANY WAYS IN  
20 DEPARTMENTS AND PROJECTS, REINFORCING A LOT OF THE CONCEPTS  
21 THAT ARE IN THE STRATEGIC PLAN AND CHANGING THE CULTURE OF THE  
22 ORGANIZATION. AND WE'RE ALSO SETTING ASIDE MONEY TO DO  
23 SOMETHING ABOUT THE PUBLIC ADDRESS SYSTEM IN THE HALL HERE. I  
24 CAN TELL YOU THAT I HAVE TROUBLE HEARING WHAT'S GOING ON IN  
25 THE BOARD MEETING. MY LITTLE SPEAKER HERE DOESN'T WORK ANY



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1 MORE. IN ANY EVENT, WE NEED TO DO SOMETHING ABOUT THE PUBLIC  
2 ADDRESS SYSTEM IN THE HALL. NOW, THAT TAKES CARE OF THE ONE-  
3 TIME MONEY. THERE'S ABOUT \$17.5 MILLION OF ONGOING REVENUE,  
4 NEW REVENUE THAT WAS NOT IDENTIFIED IN THE PROPOSED BUDGET.  
5 THE PRIMARY PROPOSAL IN THAT AREA IS WITH RESPECT TO IN-HOME  
6 SUPPORTIVE SERVICES, WORKER WAGE INCREASE, SETTING ASIDE \$9.6  
7 MILLION OF THE 17.4 OUT OF ADDITIONAL REALIGNMENT REVENUE TO  
8 FUND AN INCREASE THERE. NATURAL GAS AND ENERGY, YOU KNOW,  
9 CLEARLY, WITH GAS PRICES THE WAY THEY ARE, I.S.D. HAS DONE A  
10 REALLY REMARKABLE JOB IN THEIR LONG-TERM CONTRACTS BUT THEY  
11 DON'T LAST FOREVER AND THEY'RE GOING TO BE SEEING INCREASES IN  
12 THE COST OF NATURAL GAS. COMMUNITY AND SENIOR SERVICES,  
13 WORKING OUT ITS FINANCIAL PROBLEMS, HAS RECOGNIZED THAT THERE  
14 IS A SHORTFALL, THEY HAD A SHORTFALL THIS YEAR. WE'RE SETTING  
15 ASIDE MONEY FOR THAT. SHERIFF'S DEPARTMENT. THE SHERIFF HAS, I  
16 THINK, ONE OF THE HIGHEST PRIORITIES THAT HE HAS HAD THAT I  
17 BELIEVE THAT I'VE SEEN SINCE HE'S BEEN SHERIFF IS THE MASTER  
18 SENIOR FIELD TRAINING OFFICER. I MEAN, MERRICK BOBB, AS WAS  
19 INDICATED, WAS IN THE PAPER RECENTLY TRAINING IN PUBLIC SAFETY  
20 AS IS AS IMPORTANT AS ANYTHING ELSE, MORE IMPORTANT, PROBABLY,  
21 THAT WE HAVE PROPERLY TRAINED OFFICERS AND THE SHERIFF FEELS  
22 VERY STRONGLY THAT THE MASTER SENIOR FIELD TRAINING PROPOSAL  
23 IS A WAY THAT HE CAN KEEP HIS BEST AND BRIGHTEST IN THE-- AS  
24 TRAINING OFFICERS WHICH, LONG-TERM, WILL HAVE THE GREATEST  
25 IMPACT ON THE QUALITY OF SERVICE IN THE SHERIFF'S DEPARTMENT.





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1 ALL OF THE REST OF THE ITEMS, MADAM CHAIR, ARE WHAT I WOULD  
2 CONSIDER ADMINISTERIAL. WE DON'T HAVE A LOT OF BIG ITEMS THIS  
3 YEAR I THINK TO ADDRESS AT THIS TIME. WE'LL BE TALKING ABOUT  
4 THE STATUS OF THE HEALTH DEPARTMENT SHORTLY BUT THE  
5 ADJUSTMENTS IN THE HEALTH DEPARTMENT THAT YOU HAVE BEFORE YOU  
6 HERE ARE WHAT I WOULD CONSIDER ROUTINE AS WELL. I'D BE HAPPY  
7 TO ANSWER ANY QUESTIONS OR TAKE ANY ADDITIONAL DIRECTION ON  
8 THIS ITEM.

9

10 **SUP. MOLINA, CHAIR:** ANY QUESTION OR COMMENT? ALL RIGHT. I HAVE  
11 A MOTION ON THIS ITEM. I'D LIKE-- IT'S A MOTION BY MYSELF AND  
12 SUPERVISOR BURKE. I'LL HAVE MY STAFF PASS IT OUT. THE RECENT  
13 REPORTS INDICATE THE ISSUE CONCERNING THE LACK OF AFFORDABLE  
14 HOUSING IS NOW SIGNIFICANTLY MORE IMPORTANT TO L.A. COUNTY  
15 RESIDENTS THAN PUBLIC SAFETY, JOBS OR HEALTHCARE. THE NUMBER  
16 OF HOUSEHOLDS THAT CAN AFFORD A HOUSE OF THE MEDIAN SALES  
17 PRICE IS DECREASING AND HOME PRICES ARE, OF COURSE,  
18 APPRECIATING. IN L.A. COUNTY, A DECENT ONE BEDROOM APARTMENTS  
19 RENTS FOR APPROXIMATELY \$1,200 A MONTH. THE RENT IS AFFORDABLE  
20 AN INDIVIDUAL EARNING \$23 PER HOUR OR MORE. A MINIMUM WAGE  
21 WORKER WOULD HAVE TO WORK OVER 130 HOURS PER WEEK TO AFFORD  
22 THAT LEVEL OF AN APARTMENT. IN L.A. COUNTY, ONLY 15 PERCENT OF  
23 OUR HOUSEHOLDS CAN AFFORD THE MEDIUM PRICE HOME OF 513,000.  
24 THE INCOME NEEDED TO PURCHASE THAT HOUSE IS WELL OVER A  
25 HUNDRED THOUSAND, ASSUMING 102,000 PAYMENT. ADDITIONALLY, L.A.



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1 COUNTY HAS A HOMELESS POPULATION OVER 90,000. THESE ARE UNIQUE  
2 CHALLENGES WHICH ARE COMPOUNDED BY ESCALATING HOME PRICES AND  
3 LACK OF RENTAL OR AFFORDABLE HOUSING. MOREOVER, SIGNIFICANT  
4 INCREASES IN CONSTRUCTION AND LAND COSTS IN THE UPWARD TREND  
5 AND RENTAL RATES HAVE FURTHER DIMINISHED THE SUPPLY OF  
6 AFFORDABLE HOUSING IN L.A. COUNTY. THE BOARD MUST TAKE BOLD  
7 STEPS IN ADDRESSING THE ISSUES OF HOUSING AFFORDABILITY FOR  
8 OUR FAMILIES. WE THEREFORE MOVE THAT THE BOARD DIRECT THE  
9 EXECUTIVE DIRECTOR OF THE COMMUNITY DEVELOPMENT COMMISSION AND  
10 THE C.A.O. TO REPORT BACK TO THE BOARD IN 90 DAYS REGARDING  
11 THE FEASIBILITY OF ESTABLISHING AN AFFORDABLE HOUSING TRUST  
12 FUND. WE FURTHER MOVE THAT THE REPORT MAY INCLUDE A DETAILED  
13 PLAN FOR THE ALLOCATION AND DISTRIBUTION OF THE FUNDS THAT  
14 INCLUDES AN ANALYSIS OF THE NEED AND THE FEASIBILITY OF  
15 ESTABLISHING THE FOLLOWING TYPES OF PROGRAMS UNDER THE TRUST  
16 FUND: AN EMERGENCY SHELTER PROGRAM, A LOW INTEREST ACQUISITION  
17 PREDEVELOPMENT LOAN FUND, A LOW LEVEL CONSTRUCTION LOAN FUND,  
18 A COUNTYWIDE FUNDING MODELED AFTER THE CITY OF INDUSTRY  
19 PROGRAM AND CERTAINLY A GREEN DEVELOPMENT FUND. THIS IS A  
20 MOTION FOR A REPORT BACK, SO IT IS MOVED BY MYSELF AND  
21 SECONDED BY MS. BURKE. SO THOSE ITEMS ARE BEFORE US. ANY OTHER  
22 QUESTION OR COMMENT? IS THERE ANY OBJECTION? IF NOT, SO  
23 ORDERED ON THAT ITEM. I THINK THAT'S THE LAST ITEM.  
24



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1   **C.A.O. JANSSEN:** RIGHT. S-1, MADAM CHAIR, IS THE HEALTH  
2   DEPARTMENT BUDGET. I WOULD RECOMMEND THAT YOU TAKE UP THE  
3   STATUS REPORT NOW. THERE HAVE BEEN A COUPLE OF RATHER  
4   SIGNIFICANT CHANGES SINCE THE JUNE PRESENTATION, EVEN THOUGH  
5   THE RESULT IS ABOUT THE SAME IN TERMS OF THE SHORTFALL. THERE  
6   ARE TWO SIGNIFICANT CHANGES THAT HAVE HAPPENED.

7

8   **SUP. MOLINA, CHAIR:** ALL RIGHT. DR. GARTHWAITE, DO YOU HAVE A  
9   REPORT ON THAT ITEM?

10

11   **DR. THOMAS GARTHWAITE:** SUPERVISORS, THERE HAVE BEEN SEVERAL  
12   DEVELOPMENTS IN OUR BUDGET SINCE THE PREVIOUS ONE, AND I WOULD  
13   TURN YOUR ATTENTION TO ATTACHMENT A, WHICH I THINK BEST  
14   SUMMARIZES THE CHANGE. THE FIRST LINE OF THAT IS THE-- OUR  
15   PROJECTED CUMULATIVE BALANCE OR SHORTFALL IN OUR LAST REPORT  
16   IN JUNE AND THE NEXT LINE DOWN TALKS ABOUT-- OR SHOWS THE NET  
17   IMPACT OF THE MEDI-CAL REDESIGN PROPOSAL AS IT IS CURRENTLY  
18   UNDERSTOOD AND ITS IMPACTS ARE CURRENTLY UNDERSTOOD. I WON'T  
19   ATTEMPT TO DESCRIBE THAT IN DETAIL. IF YOU HAVE QUESTIONS, I  
20   WOULD SUGGEST THAT GARY WELLS, WHO IS HERE WITH ME, ANSWER  
21   YOUR QUESTIONS. GARY WELLS AND JOHN FRIEDMAN AND OTHERS FROM  
22   L.A. COUNTY WERE INSTRUMENTAL IN WORKING THROUGH THESE  
23   CHALLENGES WITH THE STATE DEPARTMENT OF HEALTH SERVICES AND  
24   C.M.S. AND WE OWE ALL OF THEM A GREAT DEBT OF GRATITUDE FOR  
25   THE NUMBER OF HOURS THEY PUT IN BUT ESPECIALLY FOR THEIR



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1 KNOWLEDGE AND THOUGHTFULNESS. THE SECOND AREA, THERE'S A  
2 SUBTOTAL OF THE NET IMPACT OF THE HARRIS ROADY SETTLEMENT.  
3 YOUR APPROVAL...

4

5 **SUP. MOLINA, CHAIR:** EXCUSE ME. CAN WE HAVE IT QUIET ON THIS  
6 END, PLEASE? THANK YOU. I APOLOGIZE.

7

8 **DR. THOMAS GARTHWAITE:** YOUR APPROVAL OF THE SETTLEMENT WITH  
9 THE HARRIS ROADY LAWSUITS HAS ALLOWED US TO PROJECT THAT INTO  
10 OUR BUDGET BECAUSE WE HAD CARRIED OUR BUDGET WITH THE SENSE  
11 OF-- WITH THE ASSUMPTION OF CLOSURE DIVESTERATURE OF RANCHO  
12 AND 630-06 AND THE INABILITY-- THE CLOSURE OF BEDS IN L.A.  
13 COUNTY U.S.C. IN THAT TIMEFRAME. THIS HAS A NEGATIVE EFFECT ON  
14 OUR OVERALL BOTTOM LINE. THIRD, BUILT INTO OUR ASSUMPTIONS ON  
15 THIS AND OTHER TABLES IS THE CONTINUATION OF OUR SCENARIO--  
16 SCENARIO 3 COST CONTAINMENT AND EFFICIENCY ASSUMPTIONS AND  
17 THAT WOULD INCLUDE SOME ADDITIONAL WORK IN KING DREW MEDICAL  
18 CENTER, AS I MENTIONED EARLIER TODAY, AND IN OUR REIMBURSEMENT  
19 FROM THE DEPARTMENT OF MENTAL HEALTH. FINALLY, WE CONTINUE TO  
20 WORK OTHER ISSUES THAT COULD IMPROVE OUR BOTTOM LINE, WHICH  
21 WOULD INCLUDE THINGS SUCH AS MANAGED CARE RATE INCREASE. AND,  
22 FINALLY, I POINT OUT, I CALL YOUR ATTENTION TO THE UNCERTAIN  
23 EFFECTS OF MOVING AGED, BLIND, AND DISABLED INTO MANAGED CARE.  
24 WE BELIEVE ABOUT 40% OF OUR WORKLOAD COMES FROM THE AGED,  
25 BLIND AND DISABLED. IF THAT MOVEMENT WERE TO HAVE EFFECT



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1 SOMEWHAT SIMILAR TO THE MOVEMENT OF OBSTETRICAL PATIENTS OR--  
2 INTO MEDI-CAL OR THE COVERAGE IMPROVEMENTS THAT HAVE OCCURRED  
3 WITH KIDS IN THIS COUNTY, BOTH OF WHICH I THINK ARE OVERALL  
4 GOOD THINGS, IT COULD HAVE PROFOUND EFFECTS ON THE NUMBER OF  
5 INDIVIDUALS WHO SEEK CARE IN OUR SYSTEM AND ULTIMATELY ON THE  
6 BASE OF REVENUES THAT SUPPORT OUR SYSTEM. WITH THAT IN MIND,  
7 I'M GOING TO STOP AND ASK IF YOU HAVE QUESTIONS OF EITHER ME  
8 OR GARY.

9

10 **SUP. MOLINA, CHAIR:** ALL RIGHT.

11

12 **SUP. YAROSLAVSKY:** MADAM CHAIR, NO QUESTION. I JUST WANTED TO  
13 MAKE A COMMENT VERY BRIEFLY.

14

15 **SUP. MOLINA, CHAIR:** OKAY.

16

17 **SUP. YAROSLAVSKY:** I WANT TO JUST COMMEND OUR WHOLE TEAM ON  
18 THIS. WHILE THERE ARE A LOT OF UNCERTAINTIES AND WE'LL GET  
19 INTO THAT IN THE QUESTIONS BUT I DO WANT TO SINGLE OUT PEOPLE  
20 WHO I THINK WERE HELPFUL TO US ALONG THE WAY, ASIDE FROM OUR  
21 OWN STAFF, DAVID JANSSEN, JONATHAN FRIEDMAN, GARY WELLS AND  
22 D.H.S. AND HIS TEAM, BERT MARGOLAN, CATHY OCHOA, WHO HAS BEEN--  
23 - AND S.E.I.U. AND THE ROLE THEY PLAYED IN THIS AND  
24 ASSEMBLYMAN HECTOR DELLA TORRE, WHO I UNDERSTAND PLAYED A  
25 SINGULAR ROLE IN COLLABORATING WITH US AND THAT WAS VERY MUCH



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1 APPRECIATED BY ALL OF US, I KNOW, SO IT'S TURNED OUT BETTER  
2 THAN IT COULD HAVE BEEN. IT'S NOT AS GOOD AS IT MIGHT HAVE  
3 BEEN, BECAUSE...

4

5 **SUP. MOLINA, CHAIR:** NOW, IN LIGHT OF THE CIRCUMSTANCES, I  
6 THINK ALL OF US WANT TO JOIN IN THANKING THIS TEAM. THEY WERE  
7 UNBELIEVABLE AND I SPOKE PERSONALLY TO HECTOR AND I THINK HE  
8 DID A GREAT JOB AND REALLY ARE LOOKING TO HIM TO PROVIDE A  
9 LEADERSHIP ROLE IN SOME OF THESE AREAS. HE'S INTERESTED AND  
10 KNOWLEDGEABLE AND HE WANTS TO WORK WITH US ON A COUPLE OF  
11 OTHER ISSUES, AS WELL AS THE SPEAKER WHO REALLY HELPED US ON  
12 THIS BUT I WAS IMPRESSED AND THEY WERE IMPRESSED AS WELL WITH  
13 OUR TEAM, SO I THINK THOSE-- THERE'S MUCH THANKS TO ALL OF YOU  
14 AND IT'S JUST AMAZING. IT COULD HAVE BEEN REALLY A DISASTROUS  
15 SITUATION FOR US IN THE LONG RUN BUT I THINK YOU ALL WORKED IT  
16 AND MADE IT VERY, VERY SUCCESSFUL, SO CONGRATULATIONS TO ALL  
17 OF YOU.

18

19 **SUP. KNABE:** MADAM CHAIR, I DO HAVE A QUESTION.

20

21 **SUP. ANTONOVICH:** I DO, TOO.

22

23 **SUP. KNABE:** HAVE WE LOOKED AT THE POTENTIAL IMPACT ON THE  
24 COUNTY OF, YOU KNOW, THIS WHOLE ISSUE ON THE AGED, BLIND AND  
25 DISABLED, MEDI-CAL ELIGIBLE ARE ENROLLED INTO OUR MANAGED CARE



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1 PLANS, DO WE HAVE AN IDEA. THAT, YOU KNOW, HAS THE POTENTIAL,  
2 STATEWIDE, TO CREATE A LOT OF ISSUES. I KNOW WE DEAL WITH IT  
3 AT L.A. CARE AND OTHERS SO, FROM THE COUNTY'S PERSPECTIVE, WE  
4 HAVEN'T-- HAS ANYONE LOOKED AT THAT?

5

6 **GARY WELLS:** PRELIMINARILY, WE'VE LOOKED AT IT, SUPERVISOR. THE  
7 64,000-DOLLAR QUESTION IS IF THEY MAKE THE A.B.D.S OR SO-  
8 CALLED A.B.D.S MANDATORILY ELIGIBLE, HOW MANY OF THOSE WOULD  
9 CONTINUE TO FREQUENT COUNTY FACILITY AND HOW MANY WOULD BE  
10 SIPHONED OFF TO OTHER PROVIDERS AVAILABLE UNDER THOSE PLANS. I  
11 THINK THIS ISSUE IS GOING TO BE TAKEN UP BIG TIME BY THE  
12 LEGISLATURE WHEN THEY RECONVENE IN JANUARY, BETWEEN NOW AND  
13 JANUARY. WE ARE GOING TO DO SOME MODELING AND I'M CERTAIN THAT  
14 THE D.H.S. TASK FORCE, WHICH IS SPONSORED BY THE CALIFORNIA  
15 HOSPITAL ASSOCIATION, AS WELL AS C.A.P.H., THE CALIFORNIA  
16 PUBLIC HOSPITAL ASSOCIATION, WILL BE OUR PARTNERS IN THAT  
17 ANALYSIS.

18

19 **SUP. KNABE:** ABSOLUTELY. I DIDN'T KNOW IF WE'D DONE ANY  
20 MODELING YET BECAUSE THE POTENTIAL IS PRETTY SIGNIFICANT  
21 DEPENDING ON WHERE THEY GO.

22

23 **GARY WELLS:** ABSOLUTELY.

24

25 **DR. THOMAS GARTHWAITE:** WE AGREE. THANK YOU.





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1

2 **SUP. MOLINA, CHAIR:** SUPERVISOR ANTONOVICH THEN MS. BURKE.

3

4 **SUP. ANTONOVICH:** YOU'RE PLANNING ON INCREASING THE BUDGETS  
5 WITH THE MEDICAL SCHOOLS. WHY WOULDN'T THAT HAVE BEEN INCLUDED  
6 IN THE BUDGET?

7

8 **DR. THOMAS GARTHWAITE:** WELL, WE HAVEN'T FINALIZED  
9 NEGOTIATIONS. THERE-- I THINK THE ONLY THING WE'RE LOOKING AT  
10 IN TERMS OF OUR CONTRACTS ARE POTENTIALLY SOME GENERAL  
11 MOVEMENT, JUST AS ALL THE EMPLOYEES ACROSS THE COUNTY HAD  
12 GIVEN A COST OF LIVING, THAT THERE IS PROVISION FOR GENERAL  
13 MOVEMENT IN THE CONTRACTS. THERE ARE A COUPLE OF AREAS WHERE  
14 WE'VE BEEN CITED FOR SUPERVISION ISSUES AND SO WE'RE LOOKING  
15 TO SEE IF THAT'S AN ISSUE OF THE NUMBER OF FACULTY AVAILABLE  
16 OR NOT AND IF THERE ARE WAYS TO DO THAT WITHIN OR POTENTIALLY  
17 BY ADDITION OF THE CONTRACT. THEN THERE ARE TWO SPECIFIC  
18 PROGRAMS WE'RE LOOKING AT. ONE IS THE EMERGENCY ROOM AT HARBOR  
19 AND THEN ALSO WE'RE LOOKING AT A HOSPITAL PROGRAM WHEN L.A.  
20 COUNTY U.S.C. WOULD MOVE INTO THE NEW HOSPITAL. SO THOSE ARE  
21 THE SPECIFIC AREAS THAT WE'RE CONTEMPLATING BUT WE HAVEN'T  
22 FINISHED ANY OF THE CONTRACTS AS YET.

23

24 **SUP. ANTONOVICH:** AND WHERE IS THAT MONEY IN THE BUDGET?

25



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1 **DR. THOMAS GARTHWAITE:** I THINK WE HAVEN'T ADDED IT, RIGHT?

2

3 **GARY WELLS:** YEAH, IT HASN'T BEEN ADDED YET BECAUSE THE NUMBERS  
4 THAT WILL REPRESENT THE AMOUNTS IN THE CONTRACTS ARE NOT  
5 FINALLY DETERMINED.

6

7 **SUP. ANTONOVICH:** BUT WOULDN'T YOU HAVE A CONTINGENCY FUND OR  
8 WHATEVER, INSTEAD OF COMING BACK AND ASKING FOR A NEW SOURCE  
9 OF FUNDING?

10

11 **GARY WELLS:** WELL, I MEAN, THAT REALLY IS OUR DESIGNATION FUND,  
12 WHICH WE JUST CLOSED THE BOOKS AT THE END OF LAST YEAR WITH  
13 404 MILLION. WE'VE REINVESTED A SUBSTANTIAL AMOUNT OF THAT  
14 INTO THIS YEAR'S BUDGET AND, OBVIOUSLY, WE'RE PROJECTING  
15 SHORTFALLS GOING FORWARD BUT THAT'S BASICALLY THAT PLUS OUR  
16 OTHER ANNUAL REVENUE STREAMS ARE BASICALLY WHAT WE HAVE TO  
17 FUND THOSE KINDS OF AGREEMENTS.

18

19 **SUP. ANTONOVICH:** WHAT DOLLAR AMOUNT ARE YOU LOOKING OR  
20 ESTIMATING?

21

22 **DR. THOMAS GARTHWAITE:** DR. CHERNOF HAS BEEN THE PERSON  
23 RESPONSIBLE FOR THE ONGOING NEGOTIATIONS, SO THERE MAY BE SOME  
24 THINGS HE CAN ADD WITHOUT GIVING AWAY THE CONFIDENTIAL  
25 NEGOTIATIONS.



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1

2 **SUP. ANTONOVICH:** WHAT IS THE ESTIMATE THAT YOU'RE LOOKING AT  
3 AND WHEN DO YOU BELIEVE THE CONTRACT NEGOTIATIONS WILL BE  
4 CONCLUDED?

5

6 **DR. CHERNOF:** SUPERVISOR ANTONOVICH, I THINK AT THIS POINT,  
7 BETWEEN THE TWO CONTRACTS THAT ARE UNDER NEGOTIATION, THE  
8 U.C.L.A. AND THE U.S.C. AGREEMENTS, WE'RE PROBABLY TALKING IN  
9 THE RANGE OF \$7 MILLION BETWEEN THE TWO AGREEMENTS TOGETHER.  
10 THE NEGOTIATIONS ARE ACTUALLY MOVING ALONG VERY SMOOTHLY.  
11 THERE ARE A COUPLE OF REMAINING TECHNICAL AND LEGAL ISSUES  
12 WHICH WE'LL NEED TO BRING IN FRONT OF YOUR BOARD FOR ADVICE  
13 AND GUIDANCE IN THE VERY NEAR FUTURE.

14

15 **SUP. ANTONOVICH:** AND WHEN-- YOU HAVE THE DOLLARS ALREADY IN  
16 YOUR BUDGET TO PAY FOR THIS?

17

18 **DR. CHERNOF:** NO. WE WOULD BE WORKING WITHIN THE DEPARTMENT, AS  
19 GARY WELLS HAS DESCRIBED.

20

21 **SUP. ANTONOVICH:** SO WHEN ARE THE AGREEMENTS GOING TO BE  
22 CONCLUDED?

23

24 **DR. CHERNOF:** OUR HOPE, SUPERVISOR, IS THAT THEY WILL BE IN  
25 FRONT OF THIS BOARD WITHIN THE NEXT FOUR WEEKS.



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1

2 **SUP. ANTONOVICH:** I'VE HEARD THAT BEFORE.

3

4 **DR. THOMAS GARTHWAITE:** DEPENDING WHEN THEY'RE ADOPTED AND  
5 ACTUALLY GO INTO EFFECT, THOUGH, THEY WOULD BE LESS THAN A  
6 FULL FISCAL YEAR THAT WOULD BE IF THERE WERE INCREASES THAT WE  
7 WERE RECOMMENDING IF YOU APPROVED THEM.

8

9 **SUP. ANTONOVICH:** THANK YOU.

10

11 **SUP. MOLINA, CHAIR:** ALL RIGHT. MS. BURKE.

12

13 **SUP. BURKE:** GETTING BACK TO THE AGED AND DISABLED AND THE  
14 QUESTION OF MANAGED CARE, WAS THERE A PENALTY THAT WAS  
15 ATTACHED TO IT IF YOU DON'T BOTH ADOPT THAT AS MANAGED CARE  
16 AND WHAT HAPPENS TO THAT PENALTY IF THERE WAS ONE THAT WAS  
17 ATTACHED? IS THERE A WAIVER POSSIBILITY WITH IT OR WHAT  
18 HAPPENS?

19

20 **GARY WELLS:** WELL, WITHIN THE 5-YEAR WAIVER NEGOTIATED BY THE  
21 STATE WITH THE FEDERAL GOVERNMENT, THERE IS AN AMOUNT OF \$180  
22 MILLION PER YEAR FOR EACH OF THE 5 YEARS OF THE WAIVER WHICH,  
23 IN THE FIRST TWO YEARS OF THE WAIVER, IS TIED TO WHAT'S CALLED  
24 MANAGED CARE MILESTONES, THE STATE MEETING CERTAIN MANAGED  
25 CARE REQUIREMENTS AS DEFINED BY THE FEDERAL GOVERNMENT AS A



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1    CONDITION FOR RECEIVING THAT \$180 MILLION A YEAR DURING THE  
2    FIRST TWO YEARS OF THE WAIVER. IN THE LAST THREE YEARS OF THE  
3    WAIVER, THAT'S TIED TO THE STATE INITIATING A NEW COVERAGE OR  
4    COVERAGE PROGRAM OR PROGRAMS, USING SOME OR ALL THAT \$180  
5    MILLION TO FINANCE THAT, TO REDUCE THE NUMBERS OF UNINSURED IN  
6    THE STATE OF CALIFORNIA. THE FIRST MILESTONE, AS I RECALL, IS  
7    THAT THE STATE WAS TO PASS LEGISLATION MANDATORILY PLACING THE  
8    A.B.D.S INTO MANAGED CARE, EFFECTIVE, I BELIEVE IT WAS  
9    SEPTEMBER 30TH. OBVIOUSLY, THE STATE DID NOT DO THAT. THERE  
10    WERE CONCERNS ON THE PART OF THE LEGISLATURE, IN PARTICULAR,  
11    AS TO WHETHER THE ADMINISTRATION HAD SHOWN WHETHER OR NOT THIS  
12    COULD BE DONE WITHOUT SIGNIFICANT ADVERSE IMPACT ON PATIENTS.  
13    SO THERE IS AN AMOUNT THAT-- \$180 MILLION FOR THE FIRST YEAR  
14    IS IN JEOPARDY. THEY CAN CURE PART OF IT BY ENACTING  
15    LEGISLATION PASSED THIS RECESS, AND THEY RECONVENE IN JANUARY,  
16    BUT SOME OF THAT MONEY IS AT RISK OF LOSS AND SOME WILL LIKELY  
17    BE LOST AS A RESULT OF THAT PARTICULAR REQUIREMENT AND THE  
18    STATE'S FAILURE TO MEET THAT REQUIREMENT. THERE WAS A LETTER  
19    WRITTEN BY A COUPLE SENATORS TO THE GOVERNOR, ASKING HIM TO  
20    CALL SECRETARY OR CONTACT SECRETARY LEVITT AND ASK FOR RELIEF  
21    IN RESCHEDULING OF SOME OF THOSE MILESTONES. WHETHER THAT WILL  
22    FIND FAVOR, EITHER WITH THE GOVERNOR OR WITH SECRETARY LEVITT,  
23    REMAINS TO BE SEEN. WHAT'S CLEAR IS, IS THAT SOME OF THAT  
24    MONEY IS CURRENTLY IN JEOPARDY. THERE WILL BE, I'M SURE, A  
25    VERY MAJOR DISCUSSION OF THIS ISSUE BEGINNING IN JANUARY WHEN



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1 THE LEGISLATURE RECONVENES. WE WILL BE MODELING WHAT THE  
2 POTENTIAL IMPACTS ARE TO US, AS WELL AS THE OTHER IMPACTED  
3 HOSPITALS, BOTH PUBLIC AND PRIVATE D.H.S. HOSPITALS HAVE RISK  
4 WITH RESPECT TO THIS AND, IN PARTICULAR, THE PATIENTS  
5 THEMSELVES. MY UNDERSTANDING IS THERE'S ONLY 10% OF A.B.D.  
6 PATIENTS CURRENTLY ENROLLED IN MANAGED CARE, SO THIS WOULD BE  
7 A MANDATORY CONVERSION OF THE REMAINING 90%.

8

9 **SUP. BURKE:** SO OUR STRATEGY SO FAR HAS BEEN TO OPPOSE THE  
10 ADOPTION?

11

12 **GARY WELLS:** WE HAVEN'T ACTUALLY TAKEN A POSITION OF OPPOSED  
13 AND NEITHER HAVE OUR PROFESSIONAL ORGANIZATIONS AT THIS POINT  
14 IN TIME. WHAT WE ASK FOR IS A HEALTHY, INFORMED DEBATE WITH  
15 RESPECT TO WHAT THE CONSEQUENCES WILL BE, BOTH TO THE PATIENTS  
16 AS WELL AS TO THE PROVIDERS OF THIS PARTICULAR ACTION AND I  
17 THINK, IF THAT DOES OCCUR AND I'M PRETTY CONFIDENT THAT IT  
18 WILL OCCUR, GIVEN THE PARTIES INVOLVED, I THINK THAT A MORE  
19 REASONED APPROACH TO THIS WILL DEVELOP PERHAPS IN WHAT'S  
20 CURRENTLY ON THE TABLE AND REQUIRED BY THE WAIVER. THAT WOULD  
21 BE MY HOPE AND EXPECTATION.

22

23 **SUP. BURKE:** SO YOU'LL KEEP US INFORMED AS THIS IS GOING BEFORE  
24 THE LEGISLATURE AND WHAT OUR POSITION IS AND WHAT OUR  
25 POTENTIAL DOWNSIDES-- DOWNSIDE IS?



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1

2 **GARY WELLS:** YOU BET.

3

4 **SUP. BURKE:** A PLACE LIKE RANCHO, I ASSUME, WOULD TAKE A BIG  
5 DIP UNLESS THEY COULD COMPETE.

6

7 **GARY WELLS:** YEAH, THESE PATIENTS ARE LARGE IN NUMBER IN ALL OF  
8 OUR FACILITIES.

9

10 **SUP. BURKE:** AT ALL FACILITIES?

11

12 **GARY WELLS:** YES.

13

14 **SUP. BURKE:** THANK YOU.

15

16 **SUP. MOLINA, CHAIR:** ALL RIGHT. ANYTHING ELSE ON THIS ITEM? IF  
17 NOT, AGAIN, GENTLEMEN, THANK YOU, IT WAS WELL DONE. WE LOOK  
18 FORWARD TO ONGOING SUCCESSES LIKE THIS. THANK YOU. AND THAT'S  
19 A RECEIVE AND FILE. I WANT TO POINT OUT, ON ITEM-- WE'RE GOING  
20 TO ASK FOR RECONSIDERATION OF ITEM-- IS IT 61? IT'S ITEM 61,  
21 ONLY BECAUSE, ON ITEM-- OF THAT, THE MANY ITEMS ON THE REPORT,  
22 SUPERVISOR ANTONOVICH WOULD LIKE TO VOTE "NO" ON ITEM NUMBER  
23 28. SO I'D LIKE TO MOVE FOR RECONSIDERATION. SECONDED BY  
24 SUPERVISOR ANTONOVICH. IF THERE'S NO OBJECTION, SO ORDERED.  
25 THE ITEM IS BEFORE US.





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1

2 **SUP. BURKE:** WHAT IS 28?

3

4 **SUP. MOLINA, CHAIR:** OKAY. AND SO, WITH THAT, AS NOTED,  
5 SUPERVISOR ANTONOVICH WILL BE VOTING "NO" ON ITEM 28 OF 61.  
6 ALL RIGHT. IF THERE'S NO OBJECTION, SO ORDERED ON THAT ITEM.  
7 ALL RIGHT. WE HAVE ANOTHER REPORT, ITEM NUMBER 55. IT'S MY  
8 UNDERSTANDING DR. FIELDING WILL DO THAT REPORT. DR. FIELDING,  
9 IF YOU'D JOIN US WE'D APPRECIATE IT.

10

11 **C.A.O. JANSSEN:** HE GAVE YOU A NEW WRITTEN REPORT AS WELL, I  
12 THINK, MADAM CHAIR. AND LET ME REMIND THE BOARD, I THINK  
13 JONATHAN MAY DO IT ANYWAY, HE WAS PART OF THE ADVANCED TEAM OF  
14 15 THAT WAS SENT TO NEW ORLEANS TWO WEEKS AGO, SO HE HAS BEEN  
15 THERE ON THE GROUND IN THE WATER AND I THINK HAS A PRETTY GOOD  
16 IDEA OF WHAT'S BEEN GOING ON THERE.

17

18 **DR. JONATHAN FIELDING:** THANK YOU VERY MUCH.

19

20 **SUP. MOLINA, CHAIR:** WELCOME BACK.

21

22 **DR. JONATHAN FIELDING:** THANK YOU. GLAD TO BE BACK. YES. I  
23 THINK THERE ARE A LOT OF IMPORTANT LESSONS. WE'VE PROVIDED A  
24 MEMO TO THE BOARD ABOUT THE PUBLIC HEALTH IMPLICATIONS. LET ME  
25 MAKE JUST A FEW SHORT COMMENTS ABOUT LESSONS FROM MY



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1 OBSERVATION. ONE WAS THE IMPORTANCE OF HAVING A UNIFIED  
2 COMMAND STRUCTURE EARLY. THAT DID NOT EVENTUATE AS QUICKLY AS  
3 IT COULD HAVE THERE AND I THINK IT MADE A BIG DIFFERENCE.  
4 SECONDLY, THE ISSUE OF INTEROPERABILITY FOR COMMUNICATIONS IS  
5 REALLY CRITICAL. WHEN I GOT THERE, CELL PHONES WERE marginally  
6 WORKING AND IT WAS NOT EASY FOR EVERYBODY TO GET IN TOUCH WITH  
7 EVERYBODY ELSE. F.E.M.A. DISTRIBUTED NEXTEL PHONES AND PEOPLE  
8 KIND OF SET UP THEIR OWN GROUPS WITHIN THAT, SO COMMUNICATION  
9 REMAINS VERY IMPORTANT. THIRD, THE ISSUE OF COMMUNICATION WITH  
10 THE PUBLIC. THE CITY OF NEW ORLEANS AND THE STATE WERE NOT  
11 ALWAYS SAYING THE SAME THING AND SOME BAD INFORMATION REALLY  
12 GOT OUT ABOUT, OH, THAT THERE MIGHT BE CHOLERA OUTBREAKS OR  
13 TYPHOID OUTBREAKS. THERE WERE NOT SIGNIFICANT INFECTIOUS  
14 DISEASE PROBLEMS AT ALL. THERE WERE PROBABLY 8 TO 10 CASE OF  
15 VIVIRAL VULNIFICOUS, WHICH IS A SERIOUS DISEASE BUT THAT'S A  
16 SMALL OUTBREAK AND NOT UNEXPECTED IN THAT PART OF THE WORLD.  
17 AND, FINALLY, I WOULD POINT OUT THAT ONE THING THAT WE CAN, I  
18 THINK, LEARN FROM THIS THAT WOULD APPLY TO AN EARTHQUAKE ZONE  
19 IS THE ISSUE OF MAKING SURE THAT THERE ARE TEAMS AVAILABLE  
20 QUICKLY FOR STRUCTURAL ASSESSMENT, BY HOUSE AND BY  
21 NEIGHBORHOOD, BEFORE YOU HAVE PEOPLE COMING BACK IN. THE  
22 PUBLIC HEALTH ISSUES, PROBLEMS REMAIN ARE A LACK OF POTABLE  
23 WATER FOR DRINKING, COOKING, BATHING, ET CETERA. STILL HAVE  
24 LACK OF FUNCTIONING SEWER SYSTEMS. THE HELICOPTER I TOOK  
25 SHOWED ONE OF THE MAJOR SEWAGE TREATMENT PLANTS UNDER WATER,



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1 SO YOU KNEW WHERE THE SEWAGE WAS NOT GOING AND WHERE IT WAS  
2 GOING. AND ALSO THE ISSUE, WHEN YOU HAVE PEOPLE COMING BACK  
3 IN, IF YOU HAVE FUNCTIONING WATER, YOU DON'T HAVE FUNCTIONING  
4 SEWAGE, WHERE IS IT GOING TO GO? IT'S GOING TO WIND UP ON THE  
5 STREETS AND IT'S VERY HARD TO GET PEOPLE TO USE EXTERNAL  
6 FACILITIES. ONE OF THE SIGNIFICANT PUBLIC HEALTH RISKS IS RISK  
7 OF INJURY FROM COMING BACK TO BUILDINGS THAT ARE STRUCTURALLY  
8 DAMAGED, AND, WHEN YOU LOOK AT WHAT THE CLINICS WERE SEEING  
9 THAT WERE SET UP BY THE FEDERAL GOVERNMENT THERE AND THE STATE  
10 AND OTHERS, YOU SAW THAT THE MAJOR PROBLEMS WERE INJURIES,  
11 MANY OF THEM MINOR, OF COURSE, AND RASHES FROM CONTACT WITH  
12 THE WATER OR JUST THE VERY HOT AND HUMID CONDITIONS. THERE WAS  
13 NOT TOO MUCH AIR CONDITIONING AVAILABLE BECAUSE MOST PLACES  
14 DIDN'T HAVE ELECTRICITY. THEY ALSO DON'T HAVE, AT THIS POINT  
15 OR DIDN'T, AT LEAST, AS OF YESTERDAY, A FUNCTIONING 9-1-1  
16 EMERGENCY RESPONSE SYSTEM. SO, WHILE PEOPLE COULD COME BACK  
17 INTO THE AREA, IF THEY HAD AN EMERGENCY, THAT SYSTEM WAS NOT  
18 AVAILABLE. AND THEN, OF COURSE, THE UNEVEN AVAILABILITY OF  
19 HEALTHCARE SERVICES. AS OF YESTERDAY, THERE WAS ONE HOSPITAL  
20 BACK ON. I MET WITH, AS PART OF A GROUP, WITH THE C.E.O.S OF  
21 SOME AFFECTED HOSPITALS AND SOME WERE DOWN FOR A LONG TIME AND  
22 HOPE THEY WILL COME BACK, OTHERS FUNCTIONED ALL THE WAY  
23 THROUGH. OXNARD CLINIC FUNCTIONED ALL THE WAY THROUGH BUT  
24 THERE'S ONLY ONE HOSPITAL WORKING, TO MY KNOWLEDGE, AT LEAST  
25 AS OF YESTERDAY IN NEW ORLEANS, SO THAT'S AN ISSUE IN TERMS OF



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1 GEOGRAPHIC AVAILABILITY. WE WERE ASKED INITIALLY FOR SOME  
2 ENVIRONMENTAL HEALTH INSPECTORS TO HELP RESTAURANTS GET UP AND  
3 RUNNING AGAIN. THEY WENT BACK AND FORTH ON THAT. AND THEN THE  
4 FEDERAL GOVERNMENT, THE F.D.A. GAVE THEM, I THINK, 40 OR 50  
5 INSPECTORS. SO, AT THIS POINT, THEY DON'T FEEL OURS ARE NEEDED  
6 BUT WE'VE TOLD THEM WE'RE AVAILABLE IF, AT ANY POINT, THEY  
7 NEED THEM. WE, OF COURSE, ARE WORKING WITH THE EVACUEES IN LOS  
8 ANGELES COUNTY. WE'VE BEEN WORKING WITH THE GREATER LOS  
9 ANGELES CHAPTER OF THE AMERICAN RED CROSS, WITH THE SERVICE  
10 CENTER AT 2700 WILSHIRE AND WE HAVE A STAFFING SCHEDULE TO  
11 ASSURE THAT PUBLIC HEALTH NURSES ARE AVAILABLE THERE. WE'VE  
12 ALSO BEEN WORKING AT THE DREAM CENTER WITH THEM AND INCLUDING  
13 AN INSPECTION FOR THEIR FOOD FACILITIES. WE HAVE BEEN TRYING  
14 TO KEEP TRACK OF THE PROBLEMS THAT HAVE BEEN SEEN AND SENT TO  
15 FOR CARE AND THEY TEND TO BE RESPIRATORY, GASTROINTESTINAL,  
16 JUST GENERAL MEDICAL ILLNESSES AND MISCELLANEOUS, NOTHING  
17 SURPRISING. OBVIOUSLY, IN ANY SHELTER, IN ANY CLOSE QUARTERS,  
18 YOU WANT TO BE CONCERNED ABOUT COMMUNICABLE DISEASE CONTROL.  
19 FINALLY, I THINK THAT, FOR ALL DISASTERS, THE BIGGEST IMPACT  
20 IS ALWAYS THE MENTAL HEALTH ONE. I CAN'T SAY THAT I THINK THAT  
21 THAT WAS DEALT WITH AS WELL AS IT MIGHT HAVE BEEN IN THIS  
22 TERRIBLE CATASTROPHE BUT WE KNOW WHAT POST TRAUMATIC STRESS  
23 SYNDROME IS AND MARV SOUTHARD, I'M SURE, COULD GIVE YOU MUCH  
24 MORE THAN I CAN ON THIS BUT I THINK IT'S CRITICAL THAT THE  
25 RIGHT MESSAGES GO OUT EARLY TO HELP TRY AND REASSURE PEOPLE



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1 WHERE WE CAN AND TO HELP THEM UNDERSTAND SOME OF THE FEELINGS  
2 THEY MAY BE GOING THROUGH THAT MAY BE VERY COMMON FEELINGS OF  
3 ANGER, FEELING OF GUILT, YOU KNOW, RELIVING THE PAST, THOSE  
4 KIND OF THINGS. AND WE NEED TO LET PEOPLE KNOW THAT THAT'S  
5 NORMAL AND ALSO MAKE SURE THAT THOSE WHO NEED IT GET MENTAL  
6 HEALTH COUNSELING. I'D BE HAPPY TO ANSWER ANY QUESTIONS.

7

8 **SUP. MOLINA, CHAIR:** ALL RIGHT. ANY QUESTION OR COMMENT?

9

10 **SUP. BURKE:** ARE ANY OF OUR PEOPLE STILL THERE ON THE SCENE?

11

12 **DR. JONATHAN FIELDING:** YES. THERE ARE, I BELIEVE, 4 OF THE 15  
13 MEMBER ADVANCE TEAMS STILL THERE UNDER DEPUTY CHIEF DARRELL  
14 OSBY FROM THE FIRE DEPARTMENT, AND THE CURRENT RESPONSIBILITY  
15 IS OVERSEEING AND PROVIDING ADVICE TO THE CONTRACTOR WHO IS  
16 RESPONSIBLE FOR RECOVERING BODIES THAT HAVE STILL NOT BEEN  
17 RECOVERED. IT'S DIFFICULT BECAUSE OF THE FLOODWATERS AND THE  
18 MAYOR HAS JUST AUTHORIZED-- OF NEW ORLEANS HAS AUTHORIZED A  
19 HOUSE TO HOUSE SEARCH FOR BODIES BEFORE YOU HAVE TO LOOK AT AN  
20 INDIVIDUAL BASIS ON A PRESUMPTION. SO THAT SHOULD ACCELERATE  
21 IT, BUT IT'S QUITE SLOW AND ST. BERNARD PARISH, WHICH IS EVEN  
22 FURTHER HIT, YOU REALLY CAN'T EVEN GET INTO YET TO LOOK, SO  
23 I'M AFRAID THERE'S GOING TO BE MORE BAD NEWS.

24

25 **SUP. MOLINA, CHAIR:** ALL RIGHT.



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1

2 **SUP. ANTONOVICH:** DOES THE MAYOR OVERRIDE PUBLIC HEALTH?

3

4 **DR. JONATHAN FIELDING:** WELL, THE MAYOR HAS THE OVERALL  
5 RESPONSIBILITY FOR PUBLIC HEALTH. AND, WHEN I WAS THERE, ONE  
6 OF MY PRINCIPAL ROLES WAS ADVISING THE HEALTH DIRECTOR FOR THE  
7 CITY OF NEW ORLEANS AS WELL AS THE HEAD OF PUBLIC HEALTH OF  
8 THE STATE ON WHAT ISSUES THEY SHOULD ADDRESS, HOW THEY SHOULD  
9 ADDRESS THEM, TALKING POINTS FOR THE MAYOR, HOW TO--  
10 RECOMMENDATIONS FOR THE MAYOR IN TERMS OF WHAT NEEDED TO BE  
11 DONE AND WHAT WERE THE CONDITIONS PRECEDENT TO REHABILITATION,  
12 SO THAT WAS PART OF WHAT I WAS DOING. SO I THINK THE MAYOR HAS  
13 THE OVERALL RESPONSIBILITY BUT WAS WAITING TO MAKE DECISIONS  
14 AFTER HEARING THE RECOMMENDATIONS OF THE HEALTH OFFICER. IN  
15 ADDITION, CENTERS FOR DISEASE CONTROL HAD A LARGE GROUP THERE,  
16 SUPERVISOR. WHEN I LEFT, THERE WAS SOMEWHERE BETWEEN 50 AND 70  
17 PEOPLE, A LOT OF THEM DOING EPIDEMIOLOGICAL SURVEILLANCE, BUT  
18 REALLY TRYING TO BE A SUPPORT TEAM FOR THE CITIES AND THE  
19 STATE.

20

21 **SUP. ANTONOVICH:** WHEN DOES THE STATE OR F.E.M.A. OVERRULE THE  
22 MAYOR WHEN IT COMES TO THE PUBLIC HEALTH ISSUE, THE DECEASED  
23 AND THE WATER QUALITY?

24



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1 **DR. JONATHAN FIELDING:** THERE IS SHARED RESPONSIBILITIES  
2 BETWEEN THE CITY AND THE STATE, AND I DON'T KNOW ALL THE  
3 STATUTES, SO I DON'T WANT TO MISSPEAK BUT MY UNDERSTANDING IS  
4 THAT THE STATE HAS THE PRIMARY RESPONSIBILITY FOR  
5 ENVIRONMENTAL HEALTH AND SO ANYTHING TO DO WITH SANITATION OR  
6 WATER AND THE LIKE WOULD BE PRIMARILY A STATE FUNCTION WITH  
7 RESPECT TO THE RESTORATION. HOWEVER, THE DECISION ABOUT  
8 WHETHER TO HAVE PEOPLE COME BACK IN, INDEPENDENT OF THE  
9 ENVIRONMENTAL HEALTH ISSUES, MY UNDERSTANDING IS THAT RESIDES  
10 WITH THE MAYOR.

11

12 **SUP. ANTONOVICH:** I SAW ADMIRAL ALLEN TELLING PEOPLE NOT TO GO  
13 BACK AND THE MAYOR WAS TELLING PEOPLE TO COME BACK AND I  
14 BELIEVE IT WAS ON THE "TODAY" SHOW, THEY WERE INTERVIEWING THE  
15 MAYOR AND HE HAD BASICALLY SAID HE HAS THE AUTHORITY BUT, WHEN  
16 IT BECOMES A NATIONAL EMERGENCY, I KNOW WHEN IT COMES HERE,  
17 WHEN WE WORKED WITH THE STATE OFFICE OF EMERGENCY PREPAREDNESS  
18 AND WHEN WE WORKED WITH OUR FIRES AND OUR EARTHQUAKES, WE WERE  
19 ALL ON THE SAME PAGE RELATIVE TO NORTHRIDGE, SAN BERNARDINO  
20 AND L.A. COUNTY WITH THE RECENT FIRE THAT WE HAD AND I DON'T  
21 UNDERSTAND HOW, YOU KNOW, AS A SUPERVISOR, THAT I WOULD STAND  
22 UP AND SAY, "NO, YOU CAN'T EVACUATE THOSE PEOPLE IN THE  
23 CANYON" WHICH WERE EVACUATED, I DON'T UNDERSTAND THAT.

24





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1   **DR. JONATHAN FIELDING:** I CAN'T TELL YOU I UNDERSTAND EXCEPT  
2   THAT I'VE HEARD THE SAME THING, ADMIRAL ALLEN AND THE  
3   PRESIDENT EVEN EXPRESSED SOME CONCERN ABOUT THE ORDER TO ALLOW  
4   PEOPLE BACK INTO THE ALGIERS SECTION ON THE WEST BANK  
5   YESTERDAY. HE SAID-- I THINK HE SAID SOMETHING LIKE I'M NOT  
6   SURE THIS IS THE RIGHT POINT IN HISTORY TO DO THAT, SO CAN'T--  
7   I THINK THIS IS REFLECTIVE OF ISSUES IN COORDINATION THAT HAVE  
8   OCCURRED. I THINK THERE'S BEEN A LOT MORE EXPERIENCE HERE WITH  
9   THOSE KIND OF NATURAL DISASTERS BUT I CAN'T REALLY SPEAK TO  
10  ALL THE THINGS THAT MIGHT HAVE BEEN DONE DIFFERENTLY THERE.

11

12  **SUP. ANTONOVICH:** THANK YOU.

13

14  **SUP. MOLINA, CHAIR:** AND YOU HAVE TO REMEMBER, SUPERVISOR  
15  ANTONOVICH, IT TOOK A LITTLE BIT OF WRANGLING WITH THE CITY,  
16  MAYBE ABOUT ALMOST 15 YEARS AGO AND IT FINALLY WAS DESIGNATED  
17  BY THE STATE LEGISLATURES THAT WE ARE...

18

19  **SUP. ANTONOVICH:** WITH THE DEAD BODIES, IT'S SUCH A HEALTH  
20  PROBLEM...

21

22  **SUP. MOLINA, CHAIR:** WELL, I UNDERSTAND, BUT IT SEEMS LIKE  
23  THAT'S-- THERE'S A REAL LACK OF COORDINATION AND THEY NEED  
24  THAT PART AND, HOPEFULLY, THROUGH OUR EXPERIENCES, HAVE LED US  
25  TO HAVE A BETTER, MORE EFFECTIVE COORDINATED SYSTEM THAT,



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1 HOPEFULLY, WE CAN RELY ON. BUT I THINK THAT SEEMS TO BE OUT  
2 OF-- YOU'RE NOT THE ONLY ONE. WE'VE HEARD THESE KINDS OF  
3 SITUATIONS FROM THE SANITATION TEAM THAT CAME BACK, IN FACT,  
4 WERE ORDERED OUT OF THERE, BECAUSE THEY DIDN'T WANT THEM TO--  
5 EVEN THOUGH THEY ASKED FOR THEIR ASSISTANCE AT THE END OF THE  
6 DAY, THEY DIDN'T UTILIZE THEIR EXPERTISE. IT'S JUST A LACK OF  
7 COORDINATION, UNFORTUNATELY, PEOPLE ARE COMING ACROSS  
8 CONTINUOUSLY THERE. IT'S VERY SAD TO WATCH.

9

10 **DR. JONATHAN FIELDING:** THE ONE OTHER POINT I'D MAKE IS THAT IT  
11 WAS REALLY A VERY UNUSUAL DISASTER IN THAT THE PEOPLE WHO WORK  
12 IN NEW ORLEANS ARE PEOPLE WHO LIVE IN NEW ORLEANS. YOU HAVE TO  
13 LIVE IN THE CITY TO WORK FOR THE CITY AND THEREFORE, WHEN  
14 EVERYBODY WHO IS A CITY WORKER HAS BASICALLY BEEN EVACUATED,  
15 YOU DON'T KNOW WHO IS AVAILABLE, HOW THEY'RE GOING TO BE, SO  
16 THE HEALTH DIRECTOR WANTED TO SET UP CLINICS, FOR EXAMPLE. HE  
17 DIDN'T KNOW HOW MANY PEOPLE MIGHT BE AROUND, HAD NO WAY OF  
18 CONTACTING MOST OF THEM AND TRYING TO GET A ROSTER-- AND SO  
19 THAT WAS A VERY UNUSUAL SITUATION.

20

21 **SUP. MOLINA, CHAIR:** I SPOKE WITH THE CALIFORNIA HIGHWAY PATROL  
22 AND I ASKED THEM THAT QUESTION, YOU KNOW, WHAT DO YOU DO IF A  
23 NATURAL DISASTER, OF COURSE, OUR OWN HIGHWAY PATROL OFFICERS  
24 ARE GOING TO GO LOOK AFTER THEIR OWN FAMILY AND THEY HAVE  
25 CREATED A BACKUP TEAM OF OUTSIDE FOLKS, OUTSIDE OF THE REGION



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1 THAT WOULD COME IN AND ACT AND CARRY OUT THE C.H.P. DUTIES AND  
2 RESPONSIBILITIES BECAUSE THEY RECOGNIZE THAT THEY MIGHT HAVE  
3 MANY OF THEIR OWN OFFICERS THAT WOULD BE NOT CONFLICTED BUT  
4 WOULD HAVE TO ADDRESS SOME OF THE ISSUES OF THEIR OWN FAMILIES  
5 OR MAY HAVE THE SAME INABILITY TO COME AND REPORT TO THE JOB.  
6 AND SO, UNFORTUNATELY-- FORTUNATELY FOR US, THERE'S BEEN THAT  
7 THOUGHT PROCESS TO THINK AHEAD AS TO HOW TO DO IT BUT,  
8 UNFORTUNATELY, IN PLACES LIKE NEW ORLEANS OR LOUISIANA, THAT  
9 BE HASN'T BEEN THE CASE.

10

11 **SUP. KNABE:** WELL, I THINK YOU'D BE AMAZED AT HOW MANY PLACES  
12 AROUND THE COUNTRY DON'T HAVE ANYWHERE NEAR THE KIND OF MUTUAL  
13 AID AGREEMENTS WE HAVE HERE IN LOS ANGELES COUNTY, IN  
14 CALIFORNIA AND WE DISCOVERED THAT THROUGHOUT THIS HOMELAND  
15 SECURITY PROCESS AND MEETING IN VARIOUS PARTS OF THE COUNTRY,  
16 THE LACK OF MUTUAL AID AGREEMENTS BETWEEN LOCAL ENTITIES AND  
17 THE STATE, BORDERING STATES THAT WE HAVE HERE AND, YOU KNOW,  
18 HOW WE MOVE WHEN PEOPLE-- I KNOW THAT MANY OF OUR MUTUAL AID  
19 AGREEMENTS, SECRETARY RIDGE WAS ONE THAT WAS TRYING TO TAKE  
20 MANY OF THOSE ON A NATIONAL BASIS BECAUSE OF OUR ABILITY TO  
21 MOVE, LIKE YOU SAY, WITH THE BACKUP PLAN FOR C.H.P., I MEAN,  
22 HE WAS REALLY IMPRESSED WITH ALL THAT.

23

24 **SUP. MOLINA, CHAIR:** GOOD FOR US. OKAY. THANK YOU.

25



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1    **SUP. KNABE:** GOOD NEWS, BAD NEWS, RIGHT?

2

3    **SUP. MOLINA, CHAIR:** THANK YOU SO MUCH, DR. FIELDING. WE  
4    APPRECIATE YOUR SERVICE THERE AS WELL AS YOUR REPORT. THANK  
5    YOU SO MUCH.

6

7    **DR. JONATHAN FIELDING:** THANK YOU.

8

9    **SUP. MOLINA, CHAIR:** ALL RIGHT. THAT IS A RECEIVE AND FILE  
10    REPORT. LET'S TAKE UP ITEM NUMBER 62-C. DR. CLAVREUL, YOU  
11    SIGNED UP FOR THIS REPORT-- TO SPEAK ON THIS ITEM AS WELL. OH,  
12    SHE LEFT? ALL RIGHT. THIS IS, AGAIN, DEALING WITH THE  
13    EMERGENCY OPERATIONS. MOVED BY MYSELF, SECONDED BY SUPERVISOR  
14    KNABE. IF THERE'S NO OBJECTION, SO ORDERED ON ITEM 62-C. AND,  
15    FINALLY, UNDER PUBLIC COMMENT, WE HAVE A COUPLE OF PEOPLE. ALL  
16    RIGHT. MISS DORA RAMIREZ, MISS NORA DVOSIN, I HOPE THAT'S  
17    CORRECT AND RABBI JERROLD GOLDSTEIN. PLEASE JOIN US. WHILE  
18    THEY'RE COMING UP, LET ME READ A MOTION IN THAT IS A MOTION BY  
19    BOTH MYSELF AND SUPERVISOR MIKE ANTONOVICH. FOR OVER A YEAR,  
20    THE BOARD OF SUPERVISORS, IN PARTNERSHIP WITH THE SAN GABRIEL  
21    COUNCIL OF GOVERNMENTS, OTHER COUNTY AND CITY LEADERS FROM  
22    LOCAL FIRE AND LAW ENFORCEMENT AGENCIES REVIEWED EFFORTS TO  
23    HAVE PRIVATE HOSPITALS DEDICATED IN THE EAST SAN GABRIEL  
24    VALLEY AREA AS A TRAUMA CENTER. THESE EFFORTS HAVE FOCUSED ON  
25    POMONA VALLEY HOSPITAL CENTER REENTERING THE COUNTY'S TRAUMA



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1 SYSTEM. IT WAS REPORTED BY POMONA HOSPITAL THAT IT'S NOT  
2 FEASIBLE TO REENTER THE COUNTY'S TRAUMA SYSTEM DUE TO THE LACK  
3 OF PHYSICIAN AND NURSE SPECIALISTS NECESSARY FOR A TRAUMA  
4 DESIGNATION, THE HOSPITAL'S CAPACITY AND INFRASTRUCTURE AND  
5 THE HIGH COST OF REENTERING AND SUSTAINING A DEDICATED TRAUMA  
6 SYSTEM. IT IS COMMENDABLE THAT THE POMONA HOSPITAL CONDUCTED  
7 THE FEASIBILITY STUDY TO ASSIST POLITICAL LEADERS IN THE EAST  
8 SAN GABRIEL VALLEY TO BETTER UNDERSTAND THE HOSPITAL'S CONCERN  
9 IN REENTERING THE TRAUMA SYSTEM. HOWEVER, ANY ONE OF US COULD  
10 FIND OURSELVES IN NEED OF TRAUMA CARE: AN AUTOMOBILE ACCIDENT,  
11 A HEAD INJURY, KNIFE OR GUNSHOT WOUND THAT WOULD REQUIRE  
12 SPECIALIZED MEDICAL EXPERTISE FOUND AT A DESIGNATED TRAUMA  
13 CENTER. IF ONE IS INJURED IN DUARTE, EL MONTE, WEST COVINA,  
14 IRWINDALE, CLAREMONT, OR POMONA, OR ANY OTHER CITY EAST OF THE  
15 SAN GABRIEL VALLEY, IT IS LESS LIKELY THAT THAT TREATMENT  
16 WOULD BE RECEIVED CLOSE TO HOME. CURRENTLY, HUNTINGTON  
17 MEMORIAL HOSPITAL IS THE ONLY TRAUMA CENTER SERVING THE EAST  
18 SAN GABRIEL VALLEY COMMUNITY. ALTHOUGH A DEDICATED TRAUMA  
19 CENTER IS NOT FEASIBLE AT THIS TIME, THIS BOARD IS WORKING  
20 WITH AN ALTERNATIVE SOLUTION THAT INCLUDES STATIONING A  
21 MEDEVAC HELICOPTER WITH A DEDICATED CREW 24 HOURS, SEVEN DAYS  
22 A WEEK IN THE SAN GABRIEL VALLEY TO STRENGTHEN OUR TRAUMA  
23 PREPAREDNESS NETWORK IN THE REGION, WHICH INCLUDES DEDICATING  
24 L.A. COUNTY U.S.C. MEDICAL CENTER AS THE PRIMARY TRAUMA CENTER  
25 THAT WILL RECEIVE TRAUMA PATIENTS THROUGH AIR TRANSPORT FOR



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1 THOSE AREAS NOT COVERED BY HUNTINGTON MEMORIAL HOSPITAL TRAUMA  
2 CENTER. SAN GABRIEL VALLEY RESIDENTS ARE OFTEN TRANSPORTED BY  
3 AMBULANCE, GROUND TRANSPORTATION TO L.A. COUNTY U.S.C. MEDICAL  
4 CENTER IN BOYLE HEIGHTS BUT AIR TRANSPORTED PATIENTS ARE SENT  
5 TO VARIOUS TRAUMA CENTERS ON A ROTATING BASIS. IT IS  
6 IMPERATIVE THAT THE EAST SAN GABRIEL VALLEY HAS AROUND THE  
7 CLOCK AIR LIFT CAPABILITIES WITH A PRIMARY TRAUMA HOSPITAL  
8 DEDICATED TO SERVE THE COMMUNITY. WE THEREFORE MOVE THAT THE  
9 BOARD OF SUPERVISORS DIRECT THE LOS ANGELES COUNTY FIRE CHIEF  
10 AND THE DIRECTOR OF THE DEPARTMENT OF HEALTH SERVICES  
11 EMERGENCY MEDICAL SERVICE AGENCY TO DESIGNATE A 24-HOUR, 7  
12 DAYS A WEEK AIR AMBULANCE SERVICES IN THE EAST SAN GABRIEL  
13 VALLEY AND TO DIRECT THE EMERGENCY MEDICAL AGENCY TO DESIGNATE  
14 L.A. COUNTY U.S.C. MEDICAL CENTER AS THE PRIMARY TRAUMA CENTER  
15 FOR ANY PORTIONS OF THE SAN GABRIEL VALLEY THAT ARE NOT  
16 COVERED BY HUNTINGTON MEMORIAL HOSPITAL TRAUMA CENTER. SO I'M  
17 READING THAT IN FOR NEXT WEEK. ALL RIGHT. FIRST OF ALL, MISS  
18 RAMIREZ.

19  
20 **DORA RAMIREZ:** GOOD MORNING. I'M HERE TODAY TO CALL FOR-- I'M  
21 ACTUALLY A RESIDENT OF LADERA AND I'M HERE TODAY TO CALL FOR A  
22 NEW, UNBIASED INVESTIGATION IN REGARDS TO THE PROPERTY. I LIVE  
23 AT 11202 GLIDE HILL ROAD. MR. KNABE WAS SATISFIED WITH THE  
24 FINDINGS OF L.A. COUNTY. HE WAS BRIEFED IN AUGUST. AND I FEEL  
25 THAT A LOT OF CRUCIAL INFORMATION WAS WITHHELD. I HAVE A VIDEO



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1 THAT SHOWS THE SEVERITY OF THE CONDITION OF THE PIPE,  
2 INCLUDING MANY CRACKS, ONE OF WHICH IS CAUSING MY HOUSE TO  
3 SINK 2-1/2 FEET NOW IN THE LAST 7 MONTHS. ALSO, WE HAVE HAD  
4 RAW SEWAGE BACKING UP INTO OUR HOUSE AND I WAS EXPOSED TO IT.  
5 SO NOT ONLY IS MY HOUSE SINKING, WE ALSO HAVE RAW SEWAGE  
6 BACKING UP INTO OUR BACKYARD, INTO OUR HOUSE. BUILDING AND  
7 SAFETY HAS NEVER BEEN TO MY HOUSE TO ESTABLISH STRUCTURAL  
8 DAMAGE. AND, AS TAX PAYERS, I THINK IT'S THE COUNTY'S  
9 RESPONSIBILITY TO MAKE SURE THAT MY CHILDREN HAVE A SAFE AND  
10 SOUND PLACE TO LIVE. I HAVE A STRONG CASE AND WHY WOULD YOU  
11 FORCE ME TO SUE THE COUNTY WITH THE CASE THAT I HAVE? PILES OF  
12 EVIDENCE PROVES L.A. COUNTY NEGLIGENCE. WHY SHOULD THEY GO  
13 HOME AND BE EXPOSED TO THE FUNGUS, THE BACTERIA AND THE MOLD  
14 THAT I WAS EXPOSED TO? WHY SHOULD THEY GET SICK LIKE I AM? AND  
15 I WANT ANSWERS AND I ALSO WOULD LIKE YOU TO VIEW THE VIDEO AND  
16 ANSWER WHY IS THERE FOOTAGE MISSING FROM THE VIDEO AND TAKE A  
17 LOOK AT THE VIDEO.

18

19 **SUP. KNABE:** I-- I HAVE NO PROBLEM VIEWING THE VIDEO. I'M NOT  
20 SURE ABOUT WHY ANY FOOTAGE OF YOUR ALLEGATION OF THAT. WE HAVE  
21 BEEN IN CONTACT WITH HER ON A NUMBER OF OCCASIONS AND I'D ASK  
22 DON WOLFE, OUR DIRECTOR OF PUBLIC WORKS, MIGHT BE ABLE TO GIVE  
23 US AN UPDATE AS TO WHAT'S BEEN GOING ON.

24

25 **SUP. MOLINA, CHAIR:** VERY GOOD.





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1

2 **SUP. KNABE:** TO ME, AT THE END OF THE DAY, THERE'S A  
3 DISAGREEMENT. YOU FILED THE CLAIM, RIGHT?

4

5 **DORA RAMIREZ:** AND IT WAS DENIED, AND I HAVE-- I CAN'T  
6 UNDERSTAND WHY, IF ALL THE EVIDENCE PROVES THAT L.A. COUNTY IS  
7 AT FAULT.

8

9 **SUP. KNABE:** OBVIOUSLY, THE INVESTIGATION THAT'S BEEN DONE BY  
10 OUR PEOPLE INDICATE THE OPPOSITE, SO, I MEAN, THERE IS JUST A  
11 MAJOR DISAGREEMENT HERE.

12

13 **DORA RAMIREZ:** WELL, ALSO, TOO, THOUGH, WHEN YOU HAD THE  
14 BRIEFING, YOU WERE NOT TOLD OF ALL THE OTHER STUFF. THERE'S  
15 THREE OTHER CASES IN THE CITY OF WHITTIER THAT HAVE HAD THE  
16 SAME PROBLEM, SO THE INVESTIGATION WAS NOT COMPLETE IF YOU  
17 WERE NOT NOTIFIED THAT THERE'S OTHER THINGS HAPPENING. AND  
18 ALSO, RIGHT NOW, THERE'S...

19

20 **SUP. KNABE:** I WAS NOT AWARE OF THE OTHER THREE CASES.

21

22 **DORA RAMIREZ:** WELL, THEY TOLD ME YOU WERE AWARE.

23

24 **SUP. MOLINA, CHAIR:** DID YOU WANT A REPORT NOW OR DID YOU WANT  
25 A WRITTEN REPORT BACK?



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1

2 **SUP. KNABE:** WELL, I'M-- WE CONTINUE TO WORK WITH, I JUST, IF  
3 MY COLLEAGUES DON'T MIND, I MEAN, WE CAN-- MR. WOLFE COULD  
4 MAYBE GIVE A BRIEF UPDATE AS TO WHERE WE ARE AND THEN WE'LL  
5 CONTINUE TO WORK WITH MRS. RAMIREZ. I DON'T KNOW THAT WE'RE  
6 GOING TO COME TO SOME AGREEMENT.

7

8 **DON WOLFE:** OKAY. THANK YOU, SUPERVISOR. DON WOLFE, DIRECTOR OF  
9 PUBLIC WORKS. WE DID INVESTIGATE MISS RAMIREZ'S COMPLAINT WHEN  
10 WE FIRST GOT IT. WE DID A THOROUGH REVIEW, AS WE ALWAYS DO,  
11 WHEN WE HAVE A SITUATION WHERE THERE MAY HAVE BEEN A SEWAGE  
12 SPILL THAT ADVERSELY IMPACTED A RESIDENT, AND WE TOOK A LOOK  
13 AT IT, WE FOUND NO EVIDENCE AT ALL THAT WOULD SUGGEST THAT ANY  
14 DAMAGE THAT SHE INCURRED WAS DUE TO A BACKUP OF THE PUBLIC  
15 SEWER. IT'S TRUE THAT HER HOUSE IS IN VERY BAD SHAPE. IT  
16 APPEARS TO US THAT IT'S BEEN BASICALLY SUBJECTED TO LONG-TERM  
17 NEGLECT AND LACK OF MAINTENANCE. SHE DEFINITELY HAS ISSUES  
18 WITH HER HOME. BUT, AGAIN, THERE'S A LOT OF EVIDENCE THERE TO  
19 SUGGEST THAT THERE'S BEEN LONG-TERM WATER DAMAGE TO HER HOUSE  
20 AND NOTHING TO SUGGEST THAT THERE WAS A BACKUP IN THE SEWER.  
21 WE HAVE INVESTIGATED THE SEWERS, WE ALWAYS DO IN THESE CASES  
22 AND AGAIN FOUND NO PROBLEM WITH THE PUBLIC PORTION OF THE  
23 SEWER. WE-- ANYTHING THAT SHE HAS IN THE WAY OF ADDITIONAL  
24 EVIDENCE WE'D BE HAPPY TO LOOK AT. ANYTHING THAT SHE'S GIVEN  
25 US, WE'VE GIVEN TO THE COUNTY'S CLAIM ADJUSTOR FOR HIS-- FOR



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1    THEIR CONSIDERATION AND, AT THIS POINT, THE CLAIM ADJUSTOR AND  
2    COUNTY COUNSEL AGREES WITH OUR POSITION THAT THERE IS NO  
3    EVIDENCE THAT THE COUNTY HAS DONE ANY HARM TO THE LADY.

4

5    **SUP. MOLINA, CHAIR:** VERY GOOD. THANK YOU. MISS RAMIREZ, THIS  
6    IS NOT THE PLACE TO DEBATE THESE ISSUES. IF YOU'D LIKE, YOU  
7    CAN MEET...

8

9    **SUP. KNABE:** YEAH, IF THERE'S ADDITIONAL EVIDENCE THAT YOU  
10    HAVE, WE WANT TO MAKE SURE THAT...

11

12    **DORA RAMIREZ:** WELL, THE VIDEO WAS GIVEN TO ME BY YOU GUYS-- BY  
13    L.A. COUNTY. THEY TOOK THE VIDEO AND THE PIPE IS CRACKED WITH  
14    A SEVERITY LEVEL OF 3. I DON'T WANT MY PIPE TO BE CRACKED AND  
15    I WANT IT FIXED.

16

17    **SUP. KNABE:** OKAY. RESPOND TO THAT. AND THEN, ALSO, I THINK WE  
18    NEED TO MAKE IT CLEAR, MY STAFF IS TELLING ME THERE ARE NOT  
19    THREE OTHER. IS THAT CORRECT?

20

21    **DON WOLFE:** I'M NOT AWARE OF THREE OTHERS, SUPERVISOR, AND  
22    WE'LL INVESTIGATE THAT.

23

24    **SUP. KNABE:** OKAY. IT MIGHT BE THE CITY. OKAY. THANK YOU.

25



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1   **SUP. MOLINA, CHAIR:** THANK YOU, MISS RAMIREZ. NEXT WE HAVE MISS  
2   DVOSIN AND THE RABBI.

3

4   **NORA DVOSIN:** HI. HELLO, GOOD MORNING, MY NAME IS NORA DVOSIN.  
5   AND I LIVE IN VENICE, CALIFORNIA, I HAVE LIVED IN VENICE SINCE  
6   1972 AND I AM IN SUPERVISOR YAROSLAVSKY'S DISTRICT. I HAVE  
7   WORKED IN THE ENTERTAINMENT INDUSTRY FOR THE PAST 20 YEARS AS  
8   A WRITER AND EDITOR AND A STORY ANALYST AND I ALSO WORKED FOR  
9   LOS ANGELES UNIFIED SCHOOL DISTRICT AS A VOLUNTEER IN SCHOOL  
10   GARDENS. I'M HERE TO ASK THE BOARD OF SUPERVISORS TO SUPPORT A  
11   MORATORIUM ON STATE EXECUTIONS WHILE THE CALIFORNIA STATE  
12   COMMISSION REVIEWS OUR CRIMINAL JUSTICE SYSTEM. A YEAR AGO,  
13   THE CALIFORNIA STATE SENATE CREATED A COMMISSION TO STUDY AND  
14   REVIEW THE STATEWIDE CRIMINAL JUSTICE SYSTEM. THE GOAL OF THAT  
15   COMMISSION IS TO DETERMINE WHETHER OUR SYSTEM IS FAIR AND  
16   ACCURATE AND JUST, PARTICULARLY, IN DEATH PENALTY CASES. AND  
17   WE'RE VERY GRATEFUL TO OUR STATE SENATE FOR ACTING RESPONSIBLY  
18   AND IN THE BEST INTERESTS OF ALL CALIFORNIANS. ONE OF THE  
19   ISSUES, FOR EXAMPLE, THE COMMISSION IS GOING TO LOOK AT IS  
20   STANDARDIZED D.N.A. TESTING AND STATEWIDE STANDARDS FOR DEATH  
21   PENALTY CASES. RIGHT NOW, FOR EXAMPLE, IF A MURDER VICTIM IS  
22   WHITE, A CASE IS 4 TIMES MORE LIKELY TO BECOME A DEATH PENALTY  
23   CASE THAN IF A VICTIM IS A PERSON OF COLOR. THIS IS JUST ONE  
24   EXAMPLE OF WHAT THE COMMISSION WILL STUDY BEFORE MAKING ITS  
25   RECOMMENDATIONS. THE COMMISSION HAS 3 YEARS UNTIL DECEMBER



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1 2007 TO COMPLETE ITS REVIEW AND SUBMIT ITS FINDINGS TO THE  
2 LEGISLATURE AND THE GOVERNOR. THOUGH THIS IS A STATEWIDE  
3 ISSUE, IT'S VERY CRUCIAL AS A LOCAL ISSUE. MORE THAN 30% OF  
4 THE 645 INMATES ON DEATH ROW COME FROM L.A. COUNTY, WHICH  
5 MEANS WE, THE LOCAL CITIZENS, PAY A HIGH PRICE FOR OUR CURRENT  
6 SYSTEM, FINANCIALLY AND IN GRIEF AND PAIN ENDURED BY CITIZENS  
7 WHEN POTENTIALLY INNOCENT PEOPLE ARE INCARCERATED FOR YEARS  
8 AND POSSIBLY PUT TO DEATH. IT SEEMS ONLY RIGHT THAT CALIFORNIA  
9 SHOULD HAVE A MORATORIUM ON THE DEATH PENALTY, THAT WE SHOULD  
10 NOT EXECUTE A SINGLE PERSON UNTIL WE FIND OUT HOW OUR CRIMINAL  
11 JUSTICE SYSTEM IS WORKING. WE SHOULD MAKE SURE ALL DEATH  
12 PENALTY CASES ARE TREATED FAIRLY AND WE SHOULD MAKE SURE WE'RE  
13 NEVER PUTTING A POTENTIALLY INNOCENT PERSON TO DEATH. NOW, WE  
14 WANT TO REMIND THE SUPERVISORS THAT WE'RE NOT ASKING ANY OF  
15 YOU TO MAKE A "YES" OR "NO" VOTE ON THE DEATH PENALTY; WE'RE  
16 JUST ASKING THE SUPERVISORS TO SUPPORT A MORATORIUM ON  
17 EXECUTIONS WHILE THE COMMISSION STUDIES OUR STATE JUSTICE  
18 SYSTEM. A MORATORIUM DOES NOT PREVENT THE STATE FROM PURSUING  
19 OTHER DEATH PENALTY CASES AND IT DOES NOT PREVENT JURISTS FROM  
20 HANDING DOWN NEW DEATH PENALTY SENTENCES. IT ONLY PREVENTS  
21 EXECUTIONS WHILE THE COMMISSION IS STUDYING OUR JUSTICE  
22 SYSTEM. THERE ARE POTENTIALLY TWO TO THREE INMATES FACING  
23 EXECUTION IN THE COMING YEAR. WE KNOW THE DEATH PENALTY-- IN  
24 THE COMING MONTHS, SORRY. WE KNOW THE DEATH PENALTY IS A HOT  
25 BUTTON ISSUE FOR POLITICIANS BUT, IF EVEN ONE INNOCENT PERSON



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1 IS-- IN CALIFORNIA IS EXECUTED OR ONE PERSON IS EXECUTED  
2 BECAUSE OF DISCRIMINATION IN THE COURTROOM, BASED ON RACE OR  
3 ECONOMIC STATUS, THEN THE SHAME BELONGS TO ALL OF US. WE ASK  
4 THE LOS ANGELES BOARD OF SUPERVISORS TO VOTE IN FAVOR OF A  
5 MORATORIUM WHILE THE STATE'S COMMISSION DOES ITS ALL-IMPORTANT  
6 WORK. AND I DO WANT TO SAY THAT OUR ORGANIZATION HAS MET WITH  
7 DEPUTIES FROM VARIOUS SUPERVISORS. WE HAD A MEETING WITH YOUR  
8 DEPUTY OF CRIMINAL JUSTICE, JOSEPH TARNEY. IT WAS A VERY FRANK  
9 AND VERY-- SUPERVISOR YAROSLAVSKY, IT WAS A VERY FRANK AND  
10 VERY INFORMATIVE MEETING. THIS WAS SEVERAL MONTHS AGO, BUT WE  
11 HAVE NEVER HEARD BACK FROM HIM IN ANY WAY ABOUT HOW YOU STAND  
12 ON THIS ISSUE AND YOUR-- THE PEOPLE IN YOUR DISTRICT ARE  
13 COUNTING ON YOU IN THIS ISSUE. THANK YOU ALL FOR YOUR TIME.

14

15 **SUP. ANTONOVICH:** RABBI?

16

17 **RABBI JERROLD GOLDSTEIN:** I'M RABBI JERROLD GOLDSTEIN. I'M A  
18 RESIDENT OF THE SAN FERNANDO VALLEY, I LIVE IN SHERMAN OAKS. I  
19 WAS BORN IN LOS ANGELES, RAISED HERE, EDUCATED HERE AND  
20 PRACTICED A WHOLE LIFETIME AS A RABBI. AMERICANS WERE  
21 HORRIFIED TO SEE ALL THAT TERRIBLE SUFFERING IN NEW ORLEANS  
22 AND PARTICULARLY OF THE NEW ORLEANS UNDERCLASS IN THE WAKE OF  
23 KATRINA. WE SAW MASSES OF POOR PEOPLE, MOSTLY OF COLOR, WHO  
24 WERE LEFT BEHIND AFTER AN EVACUATION HAD BEEN ORDERED. POOR  
25 PEOPLE DON'T HAVE THE MEANS TO PROTECT THEMSELVES FROM THE



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1 VICISSITUDES OF STORMS. THEY DON'T HAVE CARS, BANK ACCOUNTS  
2 AND CREDIT CARDS. IN MY RELIGION, JUDAISM, WE'RE SPECIFICALLY  
3 CALLED UPON TO PROTECT THE VULNERABLE POOR. SETIC, SETIC, TIER  
4 DOFF, JUSTICE, JUSTICE SHALL YOU PURSUE IS A CORE COMMANDMENT  
5 OF THE RELIGION THAT I BELIEVE IN, THAT I'VE TAUGHT, ALL  
6 INJUSTICE IS REPREHENSIBLE, OF COURSE, BUT THE INJUSTICE OF  
7 GOVERNMENT IS THE UGLIEST OF ALL. NO GOVERNMENT PROCESS IN  
8 CALIFORNIA OPERATES WITH GREATER DOCUMENTED INJUSTICE TO THE  
9 POOR THAN OUR DEATH PENALTY SYSTEM. JUST LOOK AT THOSE 645  
10 CONDEMNED INMATES ON OUR CALIFORNIA DEATH ROW. THEY ARE  
11 OVERWHELMINGLY POOR AND OF COLOR. THEIR CONVICTIONS OFTEN  
12 REFLECT INADEQUATE LEGAL REPRESENTATION. SOME OF THEM ARE  
13 PROBABLY EVEN INNOCENT OF THE CRIME FOR WHICH THEY WERE  
14 CONVICTED. AND, BY THE WAY, 30% OF THEM COME FROM LOS ANGELES  
15 COUNTY. THOSE 645 PEOPLE ON DEATH ROW ARE LIKE THE UNDERCLASS  
16 OF NEW ORLEANS. THEY'RE THE ONES WHO GET LEFT BEHIND. THERE  
17 ARE ONLY ABOUT-- THEY, THAT 645 THERE, ARE ONLY ABOUT 1 OR 2%  
18 OF ALL THE VIOLENT CRIMINALS IN CALIFORNIA, THAT, BECAUSE OF  
19 THE DEATH PENALTY SYSTEM, BECAUSE IT'S RIDDLED WITH  
20 STRUCTURAL, PROCEDURAL FLAWS, THOSE 645 ARE SCHEDULED FOR  
21 EXECUTION. THE CALIFORNIA SENATE, AS YOU'VE HEARD, HAS  
22 APPOINTED AN INDEPENDENT COMMISSION TO STUDY THE WAYS IN WHICH  
23 CAPITAL PUNISHMENT IS IMPLEMENTED IN THIS STATE. THEIR REPORT  
24 IS DUE IN 2007. AND, MEANWHILE, MANY OF US BELIEVE THERE MUST  
25 BE A TIMEOUT ON EXECUTIONS. I'M HERE TODAY TO CALL ON THE LOS





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1 ANGELES COUNTY BOARD OF SUPERVISORS, YOU 5, TO ADOPT A  
2 RESOLUTION SUPPORTING THE STATE MORATORIUM ON EXECUTIONS. THIS  
3 IS THE RECOMMENDATION OF THE COUNTY'S OWN COMMISSION ON HUMAN  
4 RELATIONS. CURRENT SYSTEMS FOR IMPLEMENTING THE DEATH PENALTY  
5 IN CALIFORNIA ARE SYSTEMICALLY INJUST TO THE POOR. IF WE WOULD  
6 PURSUE JUSTICE, THEN WE MUST BE SURE THAT OUR LEGAL SYSTEM IS  
7 NOT DELIBERATELY OR EVEN ACCIDENTALLY BIASED AGAINST THE  
8 WEAKEST MEMBERS OF OUR SOCIETY.

9

10 **SUP. ANTONOVICH:** THANK YOU, RABBI.

11

12 **RABBI JERROLD GOLDSTEIN:** YOU'RE WELCOME.

13

14 **SUP. ANTONOVICH:** OKAY. EXECUTIVE OFFICER?

15

16 **CLERK VARONA-LUKENS:** IN ACCORDANCE WITH BROWN ACT  
17 REQUIREMENTS, NOTICE IS HEREBY GIVEN THAT THE BOARD OF  
18 SUPERVISORS WILL CONVENE IN CLOSED SESSION TO DISCUSS ITEM CS-  
19 1, TO CONSIDER CANDIDATES FOR APPOINTMENT TO THE POSITION OF  
20 DIRECTOR OF COMMUNITY AND SENIOR SERVICES, AND CONFER WITH THE  
21 LABOR NEGOTIATOR, MICHAEL J. HENRY, DIRECTOR OF PERSONNEL, AND  
22 AGENDA NUMBER 62-A, CONFERENCE WITH LEGAL COUNSEL REGARDING  
23 INITIATION OF LITIGATION, ONE CASE, PURSUANT TO SUBDIVISION C  
24 OF GOVERNMENT CODE SECTION 54956.9 REGARDING THE REVEREND DR.  
25 MICHAEL NUDAU VERSUS THE CONGRESS OF THE UNITED STATES, ET AL,



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1 U.S. DISTRICT COURT CASE NUMBER S-0517, AS INDICATED ON THE  
2 POSTED AGENDA. THANK YOU.

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1 OPEN SESSION RESUMES:

2

3 **SUP. MOLINA, CHAIR:** WE'RE BACK INTO SESSION AND THE ITEM IS  
4 ITEM NUMBER 62-A?

5

6 **SUP. ANTONOVICH:** MOVE THE ITEM.

7

8 **SUP. MOLINA, CHAIR:** IT'S BEEN MOVED AND SECONDED. ANY QUESTION  
9 OR COMMENT? IF NOT, SO ORDERED. THANK YOU SO MUCH.

10

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1    **REPORT OF ACTION TAKEN IN CLOSED SESSION, SEPTEMBER 20, 2005**

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3

4

5    The Board of Supervisors met today in Closed Session. The  
6    following is being reported:

7

8    (CS-1) PUBLIC EMPLOYMENT (Government Code Section 54957)

9    Consider candidates for the position of Director of Community  
10   and Senior Services. CONFERENCE WITH LABOR NEGOTIATORS

11   (Government Code Section 54957.6) Agency Representative:

12   Michael J. Henry, Director of Personnel; Unrepresented

13   Employee: Candidates for position of Director of Community and  
14   Senior Services.

15

16   Action Taken: There is no reportable action.

17

18   (CS-2) CONFERENCE WITH LEGAL COUNSEL   ANTICIPATED LITIGATION

19   (Subdivision (c) of Government Code Section 54956.9) (Relates  
20   to Agenda No. 62-A this date) Initiation of litigation (one  
21   case). This case entitled The Reverend Dr. Michael A. Newdow  
22   v. The Congress of the United States of America, et al., U.S.  
23   District Court Case No.

24



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1 S-05-17 involves a challenge to the inclusion of the phrase  
2 Under God in the Pledge of Allegiance on First Amendment  
3 Establishment Clause grounds. The County is not a party to the  
4 action.

5

6 Action Taken: There is no reportable action from closed  
7 session. However, the Board reconvened in open session and  
8 approved Agenda No. 62-A which directed the County Counsel to  
9 prepare an amicus curie brief for submission to the 9th U.S.  
10 Circuit Court of Appeals in support of the Sacramento County  
11 School District's position that the Pledge of Allegiance is  
12 constitutional.

13

14 The vote of the Board was four to one with Supervisor  
15 Yaroslavsky voting "no."

16

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1 REPORTER'S CERTIFICATE

2

3 I, JENNIFER A. HINES, Certified Shorthand Reporter  
4 Number 6029/RPR/CRR qualified in and for the State of  
5 California, do hereby certify:

6 That the transcripts of proceedings recorded by the  
7 Los Angeles County Board of Supervisors September 20, 2005  
8 were thereafter transcribed into typewriting under my  
9 direction and supervision;

10 That the transcript of recorded proceedings as  
11 archived in the office of the reporter and which  
12 have been provided to the Los Angeles County Board of  
13 Supervisors as certified by me.

14 I further certify that I am neither counsel for, nor  
15 related to any party to the said action; nor  
16 in anywise interested in the outcome thereof.

17 IN WITNESS WHEREOF, I have hereunto set my hand this  
18 22nd day of September 2005, for the County records to be used  
19 only for authentication purposes of duly certified transcripts  
20 as on file of the office of the reporter.

21

22 JENNIFER A. HINES

23 CSR No. 6029/RPR/CRR

24